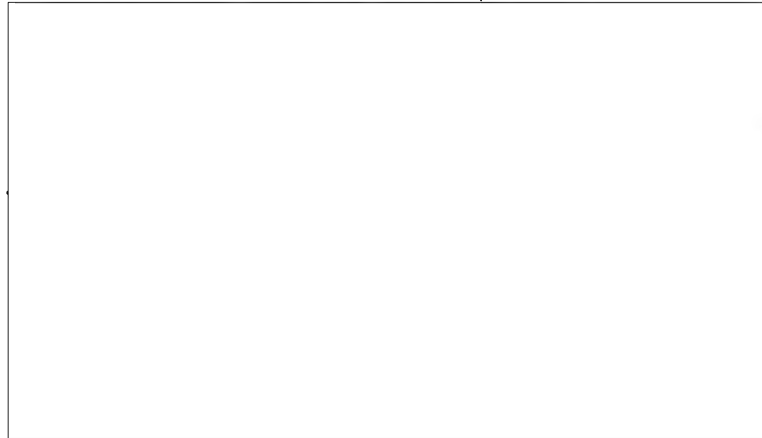


RELATIVE VALUE SCALE

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Mail to



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The Medical Society of the District of Columbia

Adopted June 24, 1959

FOREWORD

After over two years of study and consideration and many months of concentrated work the Relative Value Study has been completed. There are three parts to any such study:

- (1) First, is the coding and listing or nomenclature for professional procedures and services.
- (2) Second, is the assignment of the relative values in terms of units.
- (3) Third, is the application of a conversion factor or dollar value to the relative values to transform them into fees.

It must clearly be understood that this Study in no way sets anyone's fees or anyone's schedule of fees. The Relative Value Study is in no sense a fee schedule.

The reasons for development of this schedule are as follows:

- (1) The relationship existing between fees for most procedures remains almost the same from physician to physician. If expressed in units rather than dollars they become accurate and useful.
- (2) Health insurance in the District of Columbia requires fee schedules and indemnity schedules at many different dollar levels. Some groups want indemnity insurance that pays benefits approximating the usual physicians' fees. Others want adequate protection at a low premium and will accept some coinsurance element. Medical Service of District of Columbia wants different fee schedules for different income ceiling plans. This Study, in units, may be used as a guide by varying the dollar levels but retaining a constant relationship between fees.
- (3) The Relative Value Study will require constant change to keep abreast of changes in medicine. Obsolete procedures may need to be dropped and new ones added. Changes in methods of doing the procedures may lower or raise the time and skill required and hence change the compensation due the physician for that procedure.

APPLICATION OF THE RELATIVE VALUE STUDY

Expressed herein are unit values for procedures. These values were determined by consultation with the representative Sections or Societies within the Medical Society of the District of Columbia and through Committee action bringing all submitted values into relationship.

It is necessary to apply a unit dollar value or conversion factor to the unit value to arrive at a dollar fee schedule. A physician may easily determine his own conversion factor by taking his usual fee for a certain procedure or procedures and dividing by the number of units stated. For instance, if the usual charge for an appendectomy is \$150.00 reference to the unit value shows 30 units assigned for this operation. The conversion factor then become 500%. A subtotal gastrectomy at 70 units then becomes 70 X 500% which equals \$350.00.

The conversion factor may be applied by any physician to determine his own fees except where the unit value scale is used by agreement under an insurance contract.

MEDICAL SERVICES

Necessary drugs and materials provided by the physician may be charged for separately. Charges for x-rays and laboratory procedures are listed elsewhere in the schedule.

VISITS AND EXAMINATIONS

	Units
Office or hospital (first call - new patient - routine history and necessary examination)	2.0
Hospital visit	1.5
Home visit	2.0
Home or hospital visit (11 p.m. - 8 a.m. Sunday, Legal Holiday, Emergency during office hours)	3.0
Routine office visit	1.0
Hospital care premature infant	
(a) Initial visit	2.0
(b) Subsequent hospital visits (max. 5)	1.5
Care normal newborn	
(a) Initial examination	2.0
(b) Follow-up visit (max. 1)	1.5

SPECIAL MEDICAL PROCEDURES

The following items may be used by all physicians, but are included in the schedule to be used in cases which appear to be of a serious or complicated nature requiring additional time and special study.

Written reports should be furnished upon request to validate the performance of the described services which involve more care than can be provided by the ordinary office, home or hospital visit.

Consultation for given system not requiring complete examination - office, hospital or home	4.0
Consultation requiring complete examination - office, hospital or home	7.0
Complete history and physical examination - office, hospital or home	5.0
Office visit necessitating professional care over and above routine office visit	2.0
Prolonged detention with patient in critical condition, per hr.	5.0
Hospital visit necessitating professional care over and above routine hospital visit	2.0
Office visit for therapeutic injection only (Add cost of drug exceeding \$1.00)	.6

PSYCHIATRIC PROCEDURES

Inpatient care--complete diagnostic workup-- may include electroshock, insulin coma or other somatic treatments--	
First week	20.0
Subsequent weeks	15.0
Inpatient care without somatic treatments but with psychotherapy which may include drugs	
First week	15.0
Subsequent weeks	10.0

ALLERGY

History and Physical Examination covered by medical visits. Laboratory and X-Rays covered by Pathology and X-Ray Schedules

ALLERGY TESTING

Allergy tests as an aid in the diagnosis of disease states if read and interpreted by a physician.

The fee to be based on the type of test as well as the number performed, but with a maximum fee allowable for each disease.

Where two or more allergic diseases are present only one fee will be allowed, that fee to be that of the disease with the highest unit value.

Skin tests - scratch, intradermal or patch	
per 10 tests	2.0
maximum	15.0
Mucous membrane test (eye or nose) per 1 test	1.0
Passive transfer	
preparation of serum	2.0
recipient fee	4.0
related intradermal injections, per 10	
injections	2.0
maximum	20.0
Aerosol test, per 1 test	1.0
Preparation of extracts furnished to referring physician, to include instructions and supply of material for 1 year treatment	6.0
Immunization, including injections and cost of necessary extracts, per 1 treatment visit	1.0

PHYSICAL MEDICINE AND REHABILITATION

	Units
Electrodiagnostic testing	3.0
Electromyography	5.0
Manual muscle testing (partial)	3.0
(complete)	5.0
Single physical therapeutic modality (unless listed below)	1.0
Therapeutic Exercise	2.0
Combination of any form of heat and therapeutic exercise when such is indicated	2.0
Ultra violet light	.5
Occupational therapy	1.5
Speech therapy	2.0

SURGICAL SERVICES

Surgery and Anesthesia

General Information

Surgery:

1. All other services include two weeks' postoperative care unless indicated at head of Section.
2. In multiple surgical procedures performed through the same incision, payment will only be made for the major procedure, except by special report.
3. In multiple surgical procedures, in remote operative fields and separate incision, an additional 50 per cent of the minor fee will be paid.
4. Bilateral procedures in separate operative fields will be allowed an additional 50 per cent unless otherwise specified in the fee schedule.
5. Procedures not specifically listed will be given a fee comparable to the listed procedure of closest similarity upon written report.
6. Two physicians may not be paid for attendance on the same case at the same time except where it is warranted by the necessity of supplementary skills.
7. When two surgeons are involved in the management of a surgical case, by prior agreement, the total fee may be apportioned in relation to the responsibility and work done, and the patient is made aware of the fee distribution, according to medical ethics. When justified by a written report, a surgical fee may be increased by 25% under these specific circumstances.
8. Values for x-ray and laboratory procedures are listed elsewhere in this schedule.

Anesthesia:

1. Anesthesia Service incorporates the customary pre- and post-operative visits, the administration of the anesthetic and the administration of fluids or blood incident to the anesthesia or surgery.
2. Listed Anesthesia Service Fees are payable only when the anesthesia is personally administered by a licensed physician and surgeon who remains in constant attendance during the procedure for the sole purpose of rendering such anesthesia service.
3. If the anesthesia is administered by the attending surgeon or his assistant, the fee shall be fifty per cent of the listed amount.
4. Necessary drugs and materials provided by the physician may be charged for separately.
5. In procedures where no anesthesia unit is listed, if anesthesia service is required the fee for service is determined according to time.
6. In procedures where the anesthesia unit is listed as "T", the fee for service is determined according to time.
7. Anesthesia based on time starts with the beginning of anesthesia and ends when the anesthetist is no longer in professional attendance (when the patient may safely be placed under customary post-operative supervision)--

First half-hour (or any fraction thereof)	4.0
Third and fourth quarter-hour (or major fraction thereof), each	1.0
Each succeeding quarter-hour (or major fraction thereof)	1.0

 Obstetrical anesthesia involving delivery by manipulation 5.0
8. General Information under Surgery regarding multiple or bilateral surgical procedures is equally applicable to anesthesia procedures.

NOTE:

Key: CC--Committee Consideration
 T--Time
 S--Surgical
 A--Anesthesia

INTEGUMENTARY SYSTEM

Skin and Subcutaneous Areolar Tissue

Code No.	Units	
	S	A
INCISION		
0101 Drainage of infected steatoma	2	4
0102 Drainage of furuncle	2	4
0108 Drainage of carbuncle	CC	4
0114 Drainage of subcutaneous abscess (where not specified elsewhere)	4	4
0115 Drainage of pilonidal cyst	4	4
0125 Drainage of onychia or paronychia, with or without complete or partial avulsion of nail	2	4
0130 Incision and removal of foreign body, subcutaneous tissues, simple	4	4
0131 Incision and removal of foreign body, complicated	8	T
0140 Drainage of hematoma	2	4
0145 Puncture aspiration of abscess or hematoma	2	4
EXCISION		
0171 Biopsy of skin, subcutaneous tissue or muscle	3	4
0173 Pyogenic granuloma, electrodesiccation	3	4
0178 Excision of small neoplastic, cicatricial, inflammatory or congenital lesion of skin or subcutaneous tissues, one more than one	2	T
0180	3	4
0190 Wide excision of large neoplastic, cicatricial inflammatory or congenital lesion of skin or subcutaneous tissues, without graft or plastic closure, one with graft or plastic closure (see 0275 to 0319) or by report	5	5
0191	-	-
0194 Excision planar wart, initial	7	5
0195 more than one	9	7
0196 Electrodesiccation planar wart	4	5
0201 Hemangioma (up to 1 cm) cryocautery	2	-
0202 (1 to 3 cm)	4	-
0203 (above 3 cm) cryocautery or sclerosing	CC	-
0215 Lipectomy (see 0178 or 0190)	-	-
0230 Excision of nail, nail bed or nail fold, partial	4	4
0231 complete	6	4
0238 Excision of pilonidal cyst or sinus	30	5
0240 Excision of hidradenitis suppurative (see 0178, 0190 or 0288 to 0319)	-	-
0242 Excision of post-phlebotic varicose ulcer with graft (independent procedure) (see 0275 to 0319)	-	-
0245 Resection of malignant lesion, small (see 0178 to 0319)	-	-
REPAIR--PLASTIC SURGERY		
0261 Dermal abrasion	CC	T
0265 Excision and/or direct repair, linear scar or wound up to one inch	3	T
0266 each additional 1 inch	2	T
0267 Excision and/or direct repair of other linear lesions or wounds (wider, deeper, etc.) unless specified elsewhere	CC	T
0275 Excision and/or repair by Z-plastic, rotation flap advanced flap, double pedicle flap, or other rearrangement and suturing of adjacent tissues, small	5	T
0276 large	15	T
GRAFTS (Codes 0265 through 0325 inclusive)--List area of skin transferred, location of defect, type and size of graft, and age of patient. Fee includes creation and surgical preparation of defect and placing of graft.		
0288 Skin grafts, pinch or split skin, less than 2 square inches	5	T
0289 pinch or split skin, 2 to 32 square inches	10	T
0291 each additional 32 square inches or part thereof at same procedure	10	T
0295 free full thickness, up to 3 square inches	10	T
0296 each additional 3 square inches or part thereof at same procedure	10	T
0297 requiring skin graft of local flaps to repair donor site (use multiple procedure formula)	-	-
0309 direct flap or tube pedicle transplantation, initial stage	10	T
0310 delay, intermediate transfer, or detachment of pedicle or tube graft	5	T

Code No.	Units	
	S	A
0311 excision of lesion or preparation of recipient site and attachment of tube or pedicle graft	10	T
0312 revision, defatting or rearrangement of transferred skin graft (see 0265 to 0276, incl.)		
0319 Composite graft (full thickness of external ear or nasal ala)	20	T
0325 Derma-Fat-Fascia-Graft	25	T
BURNS--List percentage of body surface involved, location of involved areas, age of patient. (Does not include skin grafts)		
0351 Initial treatment, first degree (use Code 0073)	1.5	
0352 Dressings, initial or subsequent under anesthesia, small	4	4
0353 under anesthesia, large or with major debridement, per hour	10	T
0354 without anesthesia, small	2	
0355 without anesthesia, medium (whole face or whole extremity, etc.)	3	-
0356 without anesthesia, large (more than one extremity, etc.)	4	-
0359 Burns, open treatment of	CC	-

BREAST

INCISION		
0431 Mastotomy with exploration, or drainage of abscess - deep	10	4
EXCISION		
0441 Biopsy of breast	8	4
0445 Excision of cyst, fibroadenoma or other benign tumor, aberrant breast tissues, duct lesion or nipple (including any other partial mastectomy), unilateral	15	5
0446 Excision of chest wall tumor involving ribs	60	15
0447 Excision of chest wall tumor involving ribs plus plastic reconstruction	100	21
0451 Excision of cyst, etc., bilateral	22	7
0457 Complete (simple) mastectomy	30	7
0470 Radical mastectomy, including breast, pectoral muscles and axillary lymph nodes	60	12
E0480 Mammoplasty, unilateral	CC	8
E0481 Mammoplasty, bilateral	100	15

MUSCULOSKELETAL SYSTEM

Bones

These fees include the application of first cast and/or traction device and six weeks post-hospital care.

INCISION		
0501 Aspiration biopsy of bone marrow, including sternal puncture	3	4
0502 Bone marrow aspiration	3	
0503 with I & R	5	
0506 Incision of soft tissue, abscess from osteomyelitis	4	4
0513 Sequestrectomy for osteomyelitis or bone abscess, superficial	8	4
0516 Removal of metal band, plate, screw or nail (independent procedure)	12	5

OSTEOTOMY--Cutting, division or transection of bone, with or without internal fixation.

0526 Clavicle	30	6
0527 Humerus	30	6
0530 Radius (malunited Colles' fracture)	30	5
0531 Ulna	30	5
0532 Femur, subtrochanteric	50	11
0534 Femur, supracondylar	50	10
0536 Tibia	40	7
0537 Lesser bones	25	5
E0538 Correction of bowlegs or knock-knees, bilateral	50	12
E0539 unilateral	30	8

Code No.	S	A
EXCISION		
0550 Biopsy bone, superficial	4	4
0551 deep	15	5
0552 Claviclectomy, partial	30	5
0553 total	40	8
0554 Astragalectomy	40	7
0556 Excision of head of radius	30	5
0557 Carpectomy, one bone	25	5
0560 Coccygectomy	25	7
0561 Patellectomy or hemipatellectomy	35	6
0563 Metatarsectomy	20	6
0565 Excision of bone marrow	4	4
0566 Excision of bone cyst, chondroma or exostosis, large bones	35	8
0567 small bones	20	6
0576 Partial osteotomy; partial excision of bone, craterization guttering or saucerization of bone; diaphysectomy -femur, tibia, numerus, radius, fibula, etc.	40	8
0577 lesser bones	20	6
0580 Radical resection of bone for tumor with bone graft, major bone	70	15
0581 minor bone	25	10

INTRODUCTION (independent procedure only; for
associate procedures, see Fractures)

0591 Insertion of wire (Kirschner wire)	5	4
0593 Insertion of metal pin (Steinmann pin)	5	4
0595 Insertion of caliper or tongs	5	4
0597 Insertion of threaded or beaded wire	5	4

REPAIR

0611 Osteoplasty: shortening of bone, femur, tibia, humerus	70	12
0612 shortening of bone, radius, ulna	50	10
0613 other bones	30	8
0614 lengthening of bone	100	16

BONE GRAFT--Osteoperiosteal graft; periosteal
graft. Includes obtaining and placing of auto-
genous graft.

0617 Bone graft	75	13
0618 radius, ulna	50	10
0619 autogenous, to face or skull (including taking and placing)	CC	T
0620 other bones	30	T
0621 Cartilage graft, autogenous, to face or skull (including taking and placing graft)	CC	T
0622 Bone or cartilage graft, non-autogenous, or heterologous graft, to face or skull (including preparing and placing material	50	10
0631 Spinal fusion with partial excision of intervertebral disc (see Joints-Excision 1074 to 1075)	30	-
0635 Spinal fusion, more than two segments	75	16
0642 Iliosacral fusion	65	13
0645 Scapulopecty	40	10
0648 Patellopecty	40	7
0649 Pectus excavatum-infants-plastic repair	30	8
0650 Pectus excavatum (major) plastic repair	100	15
0654 Epiphyseal - diaphyseal fusion, epiphyseal arrest; epiphyseal fusion, femur	40	8
0655 tibia and fibula	40	8
0656 combined (femur, tibia and fibula)	60	10
0657 combined (upper and lower tibial and fibular)	60	10
0667 Freeing of bone adhesions, callus or synostosis (independent procedure) (see Osteotomy)		

Fractures

MANIPULATION

0681 Skull, non-operative (visit basis)		
0683 depressed with operation	50	13

Facial Bones

0686 Nasal, simple, closed reduction	6	4
0687 compound, closed reduction	10	5
0688 simple or compound, open reduction	20	6
0691 Malar, simple, closed reduction	5	5
0693 Malar, simple or compound, depressed, open reduction	30	6
0694 multiple surgical approaches	45	10
0696 Maxilla, simple, closed reduction	5	5
0699 simple or compound, closed reduction, with wiring of teeth	25	8
0701 simple or compound, open reduction, with wiring of teeth or local fixation	40	10
0703 Mandible, simple, closed reduction	5	4
0704 Mandible, simple or compound, closed reduction and wiring of teeth	25	8

Code No.	S	A
0705 Mandible, simple or compound, open reduction	40	10
0706 skeletal pinning with external fixation	40	10

Spine and Trunk

0702 Vertebral body, closed reduction, one more than one	20	7
0721 more than one	30	7
0732 Sacrum, compound	20	7
0733 simple or compound, with operation	CC	9
0740 Clavicle, simple, closed reduction	10	4
0741 compound	20	5
0742 simple or compound, open reduction	30	7
0747 Scapula, simple, closed reduction	10	4
0752 plus acromial process, simple, closed reduction	15	5
0753 compound	20	7
0754 simple or compound, open reduction	40	9
0756 Sternum, simple, non-depressed, closed reduction	5	4
0757 compound	20	6
0761 Ribs, simple, strapping	2	-
0762 complicated	CC	T

Pelvic (Ilium, Ischium, Pubis)

0767 Fracture, simple, closed reduction	10	4
0768 Fracture, complicated, closed reduction	CC	3
0770 one or more bones, compound	40	8
0771 one or more bones, simple or compound open reduction	50	12
0772 Acetabulum, with or without other fractures of pelvis, simple, closed reduction, no displacement	20	5
0773 central, with displacement	40	6
0774 compound	30	6
0775 simple or compound, open reduction	60	12

Upper Extremity

0778 Humerus, surgical neck, simple, not requiring manipulation	15	-
0780 surgical neck, simple, requiring manipulation with anesthesia	25	5
0781 compound	30	6
0782 simple or compound, open reduction	40	10
0784 shaft, simple, closed reduction	15	4
0785 simple, closed reduction with anesthesia	25	5
0787 simple or compound, open reduction	40	10
0788 skeletal pinning with external fixation	30	5
0791 Elbow (distal end of humerus, proximal end of radius, proximal end of ulna) condyle only, simple, closed reduction	15	5
0792 one or more bones, simple, closed reduction	15	5
0793 one or more bones, compound	40	7
0794 one or more bones, simple or compound, open reduction	40	10
0795 skeletal pinning with external fixation	30	5
0796 supracondylar	20	4
0797 olecranon, open reduction	30	7
0798 Radius, head, simple, closed reduction	10	4
0800 head, compound	20	4
0801 simple or compound, open reduction	30	7
0802 shaft, simple, closed reduction, without displacement	10	-
0803 simple, closed reduction, with displacement	15	4
0804 compound	20	4
0805 simple or compound, open reduction	30	8
0807 distal end, Colles' (including ulnar styloid) simple, closed reduction	15	4
0810 simple or compound, open reduction	30	7
0811 skeletal pinning with external fixation	20	5
0813 Ulna, shaft, simple, closed reduction	10	4
0814 shaft, simple, closed reduction with displacement and with anesthesia	15	4
0815 compound	20	5
0816 simple or compound, open reduction	30	8
0817 skeletal pinning with external fixation	25	5
0820 Radius and ulna, simple, closed reduction	15	4
0821 simple, closed reduction with anesthesia	22.5	5
0823 simple, or compound, open reduction	45	9
0824 skeletal pinning with external fixation	30	5
0827 Carpal bones, one, simple, closed reduction	8	4
0830 one, simple or compound, open reduction	25	6
0842 Metacarpal, one, simple, closed reduction	7	4
0844 one, simple, or compound, open reduction	20	5
0848 skeletal pinning with external fixation	20	5
0852 Phalanx or phalanges, one finger, or thumb, simple, closed reduction	5	4
0853 one finger, or thumb, compound	5	4
0854 simple or compound, open reduction	15	5
0865 Femur, neck, simple, closed reduction, with fixation	30	6
0867 neck, simple or compound, open reduction	50	11
0868 multiple pinning, with or without external fixation	60	11

Code No.

Lower Extremity

	S.	A.
0874 Femur, neck, simple, open reduction	50	11
0877 slipped epiphysis, closed reduction with fixation	30	6
0878 open reduction, acute	50	11
0879 reconstructive, late	80	15
0881 shaft, including supracondylar, simple, closed reduction	30	5
0883 simple or compound, open reduction	50	11
0884 skeletal pinning with external fixation	40	6
0885 Knee (distal end of femur, proximal end of tibia, proximal end of fibula) femur or tibia, condyle-closed reduction	20	5
0886 compound with general anesthesia	25	6
0887 simple or compound, open reduction	40	9
0889 two condyles	35	7
0890 Femur, compound with general anesthesia	40	9
0891 simple or compound, open reduction	50	11
0895 Patella, simple	10	4
0896 compound with general anesthesia	20	5
0897 simple, open reduction	30	7
0901 Tibia, shaft, simple, closed reduction	15	-
0902 with anesthesia.	22.5	5
0904 simple or compound, open reduction	40	8
0907 malleolus, simple, closed reduction	15	4
0910 simple or compound, open reduction	30	7
0914 Fibula, shaft, simple closed reduction	10	4
0916 simple or compound, open reduction	20	6
0920 malleolus, simple, closed reduction	10	4
0922 simple or compound, open reduction	30	7
0926 Tibia and fibula, shafts, simple, closed reduction	20	5
0927 compound with anesthesia	30	7
0928 simple or compound, open reduction	50	10
0930 skeletal pinning with external fixation	40	6
0933 Ankle, bimalleolar (including Potts) simple, closed reduction	20	5
0934 compound, with anesthesia	30	6
0935 simple or compound, open reduction	40	9
0938 trimalleolar, simple, closed reduction	25	5
0940 compound, with anesthesia	35	7
0941 simple or compound, open reduction	50	10
0944 Tarsal (except astragalus and os calcis), one, simple, closed reduction	8	4
0945 one, compound, with anesthesia	16	5
0946 one, simple or compound, open reduction	24	7
0955 Astragalus, simple, closed reduction	15	4
0956 compound with general anesthesia	20	4
0957 simple or compound, open reduction	45	7
0961 Os Calcis, simple closed reduction	15	4
0962 compound, with anesthesia	20	6
0963 simple or compound, open reduction	45	8
0964 skeletal pinning with external fixation	30	4
0967 Metatarsal, simple, closed reduction, one	7	4
0968 one, compound, with anesthesia	10	5
0970 one, simple or compound, open reduction	20	7
0980 Phalanx or phalanges, one toe, simple, closed reduction	3	4
0982 one toe, simple or compound, open reduction	10	5

Joints

INCISION

ARTHROTOMY or capsulotomy with exploration, drainage or removal of loose body, e.g., osteochondritis or foreign body.

1001 Shoulder	30	7
1002 Elbow	30	6
1003 Wrist	30	6
1006 Other joints of upper extremity	20	5
1007 Hip	50	8
1008 Knee	40	7
1010 Ankle	30	6
1013 Other joints of lower extremity	20	5
1017 Finger, one	10	4
1026 Toe, one	10	4
1046 Arthrocentesis; puncture for aspiration of joint, or injection of medication, initial	2	-
1046 subsequent	1.5	-

EXCISION

ARTHRECTOMY--Excision of joint (see Arthrodesis)

1061 Punch biopsy of synovial membrane	3	4
1065 Temporomandibular joint, unilateral	60	11
1074 Excision of intervertebral disk	60	11
1075 with spinal fusion	80	16
1077 Excision of neural arch and nerve exploration for spondylolisthesis	70	13
1082 Meniscectomy: excision of semilunar cartilage of knee joint	40	8

Code No.

	S.	A.
1085 Meniscectomy temporomandibular joint	50	9
1093 Synovectomy, elbow	50	10
1101 hip, complete	60	15
1102 knee	50	9
1103 ankle	40	8
INTRODUCTION		
1131 Arthrography: injection of air or radio-paque material into joint for roentgen examination (x-ray charges not included)	3	-
REPAIR		
ARTHRO-PLASTY--Plastic or reconstructive operation on joint, any type.	65	13
1141 Shoulder	55	11
1142 Elbow	45	9
1143 Wrist	20	5
1144 Finger, one joint	80	16
1150 Hip	70	13
1151 Knee	60	10
1152 Ankle	15	5
1153 Toe, one joint	25	6
1162, Metatarsophalangeal joint; bunion operation	25	6
ARTHRODESIS--Fusion of joint, with or without tendon transplant.		
1166 Shoulder	65	13
1167 Elbow	55	11
1168 Wrist	45	9
1170 Finger, thumb, one joint	15	5
1175 Hip	80	16
1176 Knee	65	12
1177 Ankle	55	11
1178 Hammer toe, operation one toe	15	5
1181 Hallux rigidus, repair of	25	6
1183 Tarsal, joints, one or more	30	6
1184 Other joints, lower extremity	30	6
1185 Foot, triple arthrodesis, unilateral	50	7
1187 Foot, with tendon transplantation	60	12
1190 Stabilization of joints by bone block	40	8
SUTURE		
1201 Capsulorrhaphy: suture or repair of joint capsule (independent procedure) for recurrent dislocation, shoulder	65	12
1202 patella	45	8
1211 Suture of torn, ruptured or severed collateral ligaments, knee	40	8
1213 Suture of torn, ruptured or severed cruciate, knee	40	8
1215 Reconstruction, both collateral or cruciate ligaments, knee	55	13
1216 Reconstruction, both collateral ligaments, ankle	50	10
1217 Reconstruction both metacarpophalangeal or interphalangeal	30	7
MANIPULATION		
Manipulation of joint under general anesthesia, including application of cast or traction. (Independent procedure) (Dislocations excluded.)		
1221 Shoulder	5	4
1222 Elbow	4	4
1223 Wrist	4	4
1224 Digits, one or more, under anesthesia, where no other surgical procedure is performed	2.5	4
1226 Hip	6	4
1227 Knee	5	4
1228 Ankle	4	4
1232 Spine	6	4
1233 Manipulation of shoulder for fibrous ankylosis, under anesthesia	5	4
1241 Turnbuckle jacket, body only, for scoliosis	10	4
1244 Club foot and application of cast, unilateral	2	4
1245 application of subsequent casts unilateral	2	4
1246 application of cast, bilateral, initial	3	4
1247 application of subsequent casts, bilateral	3	4
DISLOCATIONS		
1251 Temporomandibular, simple, closed reduction	5	4
1256 Vertebra, cervical, simple, closed reduction with anesthesia	40	5

Code No.	S	A
1258 cervical, simple or compound, with operation	75	14
1262 dorsal, simple, closed reduction with anesthesia	40	5
1264 dorsal, simple or compound, with operation	75	15
1267 lumbar, simple, closed reduction with anesthesia	40	5
1270 lumbar, simple or compound, with operation	75	15
1273 Clavicle, sternoclavicular, simple, closed reduction	5	4
1274 compound, with anesthesia	15	4
1275 simple or compound, open reduction	25	7
1278 acromioclavicular, simple, closed reduction	7	4
1281 simple or compound, open reduction	30	7
1284 Shoulder (humerus), simple, closed reduction	5	4
1286 simple or compound, open reduction	40	8
1290 Elbow, simple, closed reduction	8	4
1291 compound, with anesthesia	16	5
1292 simple or compound, open reduction	40	8
1295 Wrist, carpal, one bone, simple, closed reduction	7	4
1296 compound, with anesthesia	14	5
1297 simple or compound, open reduction	30	6
1298 more than one bone, simple, closed reduction	10	4
1300 compound, with anesthesia	20	5
1301 simple or compound, open reduction	40	8
1304 Metacarpal, one bone, simple closed reduction	5	4
1305 one bone, compound, with anesthesia	10	4
1306 simple, or compound, open reduction	20	5
1315 Finger, one, one or more joints, simple closed reduction	3	4
1316 compound	6	4
1317 simple or compound, open reduction	12	5
1326 Thumb, simple, closed reduction	3	4
1327 compound, general anesthesia	10	4
1328 simple or compound, open reduction	15	5
1332 Hip (femur) simple, closed reduction	15	4
1334 simple or compound, open reduction	50	10
1338 congenital, closed reduction	15	5
1340 dislocation complicated	CC	T
1344 Knee (tibia), simple, closed reduction	10	4
1345 compound, with general anesthesia	20	5
1346 simple or compound, open reduction	50	8
1350 Patella, simple, closed reduction	5	4
1351 compound, with anesthesia	10	5
1352 simple or compound, open reduction	30	8
1355 Ankle, simple, closed reduction	10	4
1356 compound, with anesthesia	20	4
1357 simple or compound, open reduction	40	8
1361 Tarsal, simple, closed reduction	10	4
1362 compound, with anesthesia	20	5
1363 simple or compound, open reduction	35	6
1371 Astragalo-tarsal, simple, closed reduction	10	4
1372 compound, with anesthesia	20	5
1373 simple or compound, open reduction	35	6
1376 Metatarsal, one bone, simple, closed reduction	5	4
1377 compound, general anesthesia	10	5
1378 simple or compound, open reduction	20	6
1385 Toe, one, simple, closed reduction	3	4
1386 compound, with anesthesia	6	4
1387 simple or compound, open reduction	12	5
1391 more than one, one or more joints, simple closed reduction	5	4
1392 compound	10	5

SPRAINS (use Code 0078)

Bursae

INCISION

1401 Drainage of infected bursa	3	-
1402 with general anesthesia	3	4
1406 Removal of subdeltoid calcareous deposits	15	5
1410 Removal of subtrochanteric calcareous deposits	20	5
1413 Puncture for aspiration of bursae, initial	2	4
1418 subsequent	1.5	4
1424 Needling of bursa	2	4
1425 subsequent	1.5	4
1427 with irrigation of bursa	2	4
1428 subsequent with irrigation of bursa	1.5	4

EXCISION

1430 Radical excision of bursae, forearm, viz. tenosynovitis fungosa, Thc., and other granulomas	50	9
1431 Excision of bursa, olecranon	15	5
1433 prepatellar	15	5
1435 subacromial	20	5
1436 ischial	20	6

Code No	Muscles	S	A
INCISION			
1450 Removal of foreign body in muscle, general anesthesia		CC	T
1452 Biopsy of muscle		4	4
1454 Division of scalenus anticus, without resection of cervical rib		25	5
1456 Division of scalenus anticus, with resection of cervical rib		60	13
1458 Division of sternomastoid for torticollis, open operation		25	6
REPAIR			
1487 Repair of diaphragmatic hernia		60	15
SUTURE			
1495 Suture of ruptured diaphragm		55	13
Tendons, Tendon Sheaths and Fascia			
INCISION			
1511 Drainage of tendon sheath, infection for acute tenosynovitis, one digit		10	4
1512 one digit, (see extremities--incision)			4
1514 Drainage of tendon sheath, infection for tenosynovitis single and/or wrist, ulnar or radial bursa infection		30	5
1517 Injection of hydrocortone or other medication, tendon sheath, hand (including drug)		2	4
1519 Incision of fibrous sheath of tendon for stenosing tenosynovitis, to include freeing of tendons or removal of foreign body		20	5
1531 Division of iliotibial band, open operation		30	5
1534 Stripping of ilium (Soutter operation)		40	7
1535 Tenotomy, corrective, single digit, subcutaneous		5	4
1536 corrective, multiple		10	5
1539 hip abductors, subcutaneous		10	5
1541 open		30	6
EXCISION			
1552 Excision of lesion of tendon or fibrous sheath, including ganglion, digits only		10	5
1553 in other locations		20	6
1555 Radical excision of bursae, forearm, viz., tenosynovitis fungosa, Thc., and other granulomas (see 1430)		-	10
1562 Excision of Baker's cyst (synovial cyst of popliteal space)		30	8
1570 Fasciotomy, single, palm or sole, subcutaneous, blind		10	5
E1573 for Dupuytren's contracture, partial		30	6
E1574 including finger extensions and vertical bands, radical		45	9
REPAIR			
1580 Repair or suture extensor tendon, single, hand or foot distal to wrist or ankle		10	5
1581 Repair or suture extensor tendon, multiple, hand or foot distal to wrist or ankle		-	T
Add 25% each additional tendon			
1582 single, forearm or leg, add 50% for each additional tendon		15	5
1583 Repair or suture flexor tendon, single, unless otherwise listed		20	7
1584 Repair or suture flexor tendon, multiple		-	T
Add 50% each additional tendon			
1585 Transfer, or transplant, or free graft of tendon, single, distal to elbow, distal to knee		30	8
1586 single, elbow to shoulder, knee to hip		50	9
1587 Tenolysis, single		20	6
1589 Lengthening or shortening tendon		20	6
1592 Retrieve or re-route tendon through separate incision, add 25% of appropriate fee		-	-
1612 Free fascial graft for reconstruction tendon pulley or repair bowstring tendon, single (complete procedure)		20	5
1613 for reconstruction tendon pulley or repair bowstring tendon to form gliding surface for tendons (complete procedure)		10	5
1616 Abdominal fascial transplants, bilateral		55	12
1617 Free fascial graft to face		CC	T
1632 Patellar advancement		50	10
1633 Rupture quadriceps insertion		30	8
1640 Rupture biceps tendon from insertion elbow		30	8
1641 Flexor plasty elbow		50	11

Code No.	Units		Code No.	Units	
	S	A		S	A
1654 Repair ruptured supraspinatus tendon or musculotendinous cuff shoulder	40	9	1922 Excision of nasopharyngeal fibroma	30	7
1655 Suture of complete shoulder cuff avulsion	70	15	1928 Septectomy: submucous resection	30	7
Extremities			1935 Submucous resection of turbinate, complete or partial, unilateral or bilateral (independent procedure)	10	7
INCISION			ENDOSCOPY		
1682 Drainage of felon with general anesthesia	10	4	1941 Rhinoscopy with removal of foreign body in nose	3	-
1686 Drainage of single, infected, space of hand (lumbrical, hypothenar, middle palmar, etc.) with or without tendon sheath involvement	15	4	1942 with general anesthesia	7	4
1692 Drainage of multiple, infected spaces of hand (with or without tendon sheath involvement)	30	5	1943 by way of lateral rhinoplasty	CC	9
AMPUTATION			REPAIR		
Upper Extremity			E1950 Rhinoplasty, complete external parts (including bony pyramid, lateral cartilages, and tip as necessary)	70	T
1701 Interthorascapular	80	17	E1953 nasal bridge collapse, bone or cartilage graft	CC	T
1703 Disarticulation of shoulder	60	13	DESTRUCTION		
1705 Arm through humerus	40	7	1965 Caulterization of turbinates, unilateral or bilateral (independent procedure)	3	4
1708 Forearm, through radius and ulna	40	7	MANIPULATION		
1712 Cincoplasty, complete procedure	60	11	1970 Reduction of fractured nasal bones (see 0686 to 0688)	-	-
1718 Disarticulation of wrist	30	7	1971 Control of primary nasal hemorrhage, with cauterization of septum	3	4
1722 Hand through metacarpal bones	30	7	1974 with nasal pack	3	4
1725 Metacarpal, with finger or thumb, one with split or Wolff graft, or skin plastic and/or tenodesis with definitive resection palmar digital nerve	20	T	1978 by ligation of ethmoid artery	25	4
1737 Finger, any joint, or phalanx, one, with split or Wolff graft, or skin plastic and/or tenodesis, with definitive resection volar digital nerves	12.5	T	1979 by ligation of external carotid-artery	25	5
Lower Extremity			Accessory Sinuses		
1745 Interpelviabdominal	100	T	INCISION		
1748 Disarticulation of hip	75	18	1981 Antrum puncture, unilateral	2	4
1750 Disarticulation of knee	40	8	1985 Maxillary sinusotomy, simple, antrum window operation, unilateral	15	6
1752 Thigh through femur, including supracondylar	50	10	1986 bilateral	20	7
1760 Guillotine, thigh	50	8	1988 Radical (Caldwell-Luc) unilateral	40	7
1763 with subsequent revision or reamputation (same surgeon)	60	7	1991 Sphenoid sinusotomy	30	7
1767 Leg, through tibia and fibula	45	7	1992 Frontal sinusotomy, external, simple (trephine operation)	40	5
1771 Guillotine, leg	40	7	1993 radical	50	10
1774 with subsequent revision or reamputation (same surgeon)	50	7	1994 Combined external frontal, ethmoid and sphenoid sinusotomy, unilateral	50	13
1778 Ankle (Syme, Pirogoff), with skin plastic, and resection nerves	45	8	EXCISION		
1782 Foot, transmetatarsal, each foot	30	8	2006 Ethmoidectomy, intranasal, unilateral	20	6
1785 midtarsal	30	8	2013 external, unilateral	30	7
1788 Metatarsal with toe, split or Wolff graft, or skin plastic and/or tenodesis, with definitive resection digital nerves	20	T	2016 bilateral	40	9
1802 Toe, any joint, or phalanx, one	10	4	SUTURE		
1803 Toe, more than one, split or Wolff graft, or skin plastic and/or tenodesis, with definitive resection, digital nerves	15	T	2031 Closure of dental fistula of maxillary sinus with flap or radical antrotomy	40	10
REPAIR			2032 Closure oro-nasal fistula (local mucoperiosteal pedicle flaps)	20	9
1811 Freeing of web fingers, with flaps	25	7	Larynx		
1815 Freeing of web fingers, with flaps with graft	35	10	INCISION		
Plaster Casts (Independent Procedure Only)			2041 Laryngofissure with removal of tumor	50	13
1851 Molded plaster to forearm	2	T	EXCISION		
1854 elbow to fingers	2	T	2051 Laryngectomy, without neck dissection	80	15
1856 hand and wrist	2	T	2054 with neck dissection	CC	T
1860 shoulder to hand	3	T	2055 Hemilaryngectomy	80	15
1862 shoulder spica	5	T	2057 Epiglottidectomy, external approach	70	12
1865 ankle (foot to mid leg)	2	T	2058 end-oral approach	CC	7
1867 knee (foot to thigh)	4	T	INTRODUCTION		
1871 Ambulatory leg cast	3	T	2061 Injection of radiopaque substance into larynx for bronchography, indirect method	3	5
1875 Molded plaster to leg	2	T	2063 direct with bronchoscope	5	5
1878 Spica, unilateral (hip to foot)	6	T	ENDOSCOPY		
1882 bilateral	7	T	2071 Laryngoscopy, direct, diagnostic (independent procedure)	10	5
1885 Body, shoulder to hips	7	T	2074 with biopsy	15	5
1886 including head	8	T	2077 operative, including removal of foreign body	15	5
1891 Unna boot	9	T	2081 including removal of papilloma or other tumor	20	6
RESPIRATORY SYSTEM			2086 indirect	0	-
Nose			2087 Lynch suspension	10	5
INCISION			Trachea and Bronchi		
1901 Drainage of nasal abscess	5	4	INCISION		
1905 Drainage of septal abscess	5	4	2101 Tracheotomy (independent procedure)	20	5
EXCISION			2103 Bronchotomy and removal of tumor	60	15
1911 Biopsy, soft tissue, nose	3	4	2104 Bronchotomy and removal of foreign body	60	15
1915 Excision of nasal polyp	5	4	ENDOSCOPY		
1916 Excision nasal polyps, multiple, unilateral or bilateral, one or more stages	10	T	2111 Bronchoscopy, diagnostic	15	5
1917 with anesthesia	15	T	2113 with biopsy	15	5
			2117 with removal of foreign body	20	5

Code No.	Units	
	S	A
2120 with excision of tumor	20	5
2121 with aspiration of bronchus	16	5
2122 with drainage of lung abscess or cavity, initial	20	5
2123 with lipiodol injection	16	5
2124 subsequent	11	5
2126 Bronchospirometry and catheterization of bronchi (independent procedure)	20	6
2127 Tracheal aspiration (independent procedure) under direct vision	12	5
2128 indirect	0	-

REPAIR

2131 Tracheoplasty: plastic operation on trachea, cervical	CC	12
2132 intrathoracic	70	17
2133 Bronchoplasty (graft repair)	80	20
2134 (excise stenosis and anastomosis)	80	20
2135 (with lobectomy and anastomosis)	80	22

SUTURE

2141 Tracheorrhaphy: suture of external tracheal wound or injury, depending on structure and extent of injury (cervical)	35	8
2142 (intrathoracic)	70	13
2144 Closure of tracheostomy or tracheal fistula	10	6
2147 Closure of tracheo-esophageal fistula	70	22

Lungs and Pleura

INCISION

2151 Thoracotomy, exploratory, including control of hemorrhage and/or biopsy and cardial massage	50	13
2154 with open drainage of empyema cavity by rib resection (independent procedure)	30	10
2157 with closed drainage of empyema cavity; tube drainage with negative pressure (independent procedure)	10	5
2160 with removal of intrapleural foreign body or fibrin body	50	15
2163 with open intrapleural pneumonolysis	50	15
2166 Pneumonotomy, exploratory	45	12
2170 with open drainage of pulmonary abscess or cyst	50	13
2173 with removal of foreign body from lung	60	13
2176 Cruciate incision of thickened scar deposited on visceral pleura	50	12
2177 Total pulmonary decortication	80	21
2180 Pneumonocentesis: puncture of lung for aspiration biopsy	7	4
2183 Thoracentesis: puncture of pleural cavity for aspiration, initial	3	4
2186 subsequent	3	4

EXCISION

2191 Total pneumonectomy	80	17
2193 Total or subtotal lobectomy with or without poudrage	80	17
2194 Wedge resection	65	14
2196 Pleurectomy, any type (independent procedure)	50	12

ENDOSCOPY

2201 Thoracoscopy, exploratory (independent procedure)	15	5
2204 with biopsy	20	5
2207 Closed intrapleural pneumonolysis	20	7

SURGICAL COLLAPSE THERAPY

THORACOPLASTY--Extrapleural resection of ribs, any type

2211 first stage	50	14
2212 second stage	20	10
2213 third stage	20	10
2217 Extrapleural pneumonolysis, including associated filling or packing procedures	45	12
2221 Pneumothorax: intrapleural injection of air, initial	5	4
2222 subsequent	2	4

CARDIOVASCULAR SYSTEM

In those instances where hypothermia is administered, the fee for the anesthesiologist will be on a time basis as shown in the Schedule of Allowances.

Heart and Pericardium

CARDIAC SURGERY

The following shall govern the maximum number of physicians to be paid incident to open heart surgery and the basis for their compensation:

Code No.	Units	
	S	A
CARDIAC CATHETERIZATION		
a. Charge Physician		SA
b. Consultant		SA
c. An Assistant --Will Not be Compensated		

OPEN HEART SURGERY

a. Surgeon	SA
b. Assistant Surgeon	SA
c. Cardiologist --Monitoring at Surgery	CC
d. Anesthesiologist (only one anesthesiologist to be paid)	SA
e. Manager of Heart-Lung Machine	CC

SA--Schedule of Allowances

SR--Special Report

INCISION

2301 Cardiotomy with exploration or removal of foreign body	80	22
2305 Pericardiotomy with exploration, drainage or removal of foreign body	70	
2310 Pericardiocentesis: puncture of pericardial space for aspiration	5	5
2311 subsequent	3	5
2315 Valvulotomy or commissurotomy, mitral-pulmonary	80	22
2316 Operation for regurgitation	80	22
2317 Operation for coronary disease (poudrage)	50	20

EXCISION

2321 Pericardiectomy	80	20
2325 Valvulectomy	80	25
2326 Excision of auricular appendage	60	20

INTRODUCTION

2331 Catheterization of the heart (independent procedure)		6
right only	20	
left only	15	
both	30	
2332 Injection for angiocardiograms	7	5
2333 Retrograde aortography - cut down and pass catheter		6

DESTRUCTION

2341 Cardiolytic	55	18
2345 Pericardiolytic	55	18

SUTURE

2351 Cardiorrhaphy: suture of heart wound or injury	70	20
2352 suture I-A septal defect	80	23
2353 suture I-V septal defect	100	25
2355 Pericardiorrhaphy: suture of pericardial wound or injury	50	20

Arteries and Veins

INCISION

ARTERIOTOMY-- With removal of embolus:

2369 Hemodialysis, insertion of cannula in artery and vein, only		3
2370 Hemodialysis, professional fee to supervising physician	10	
2373 Trunk	60	12
2376 Neck	50	11
2380 Extremity	50	10

PHLEBOTOMY--With removal of thrombus:

2397 Trunk	50	12
2401 Neck	40	10
2404 Extremity	40	8

EXCISION

2424 Excision of arch of aorta and insertion of graft	CC	26
2425 Excision of arteriovenous aneurysm	CC	T
2426 Excision of coarctation of aorta	80	26
2427 Repair of thoracic or abdominal aorta	85	25
2428 Popliteal aneurysm	60	13

INTRODUCTION

2432 Wiring of aneurysm aortic	40	10
2434 Arteriography (exclusive of x-ray allowance)	7	6
2435 (exclusive of x-ray allowance) lumbar	10	5
2438 Aortic Ventriculogram, retrograde, exclusive of cut-down	8	
2439 Abdominal Vein Catheterization, for diagnostic studies, including cut-down	10	

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Code No.	Units		Code No.	Units	
	S	A		S	A
SUTURE			3127 Duodenal or biliary drainage with routine examination	3	
2951 Closure of salivary fistula	30	8	3128 Duodenal drainage with secretin	4	
MANIPULATION			3131 Pyloroplasty	40	9
2961 Dilation of salivary duct: pyalectasis	3	4	3133 Gastroduodenostomy	50	10
Pharynx, Adenoids, and Tonsils			3135 Gastrojejunostomy	50	10
INCISION			3136 with partial vagotomy: vagotomy	60	12
2971 Drainage of retropharyngeal abscess, internal approach	5	5	3137 Gastrostomy for feeding	40	7
2974 external approach	CC	5	SUTURE		
2977 Drainage of peritonsillar abscess	5	5	3141 Gastrorrhaphy; suture of perforated gastric ulcer, wound or injury	40	8
EXCISION			3144 Closure or taking down of gastroduodenal anastomosis (gastroduodenostomy)	70	12
2982 Biopsy of pharynx, local anesthesia	7	-	3146 Closure or taking down of gastrojejunal anastomosis (gastrojejunosotomy)	70	12
2983 general anesthesia	7	4	3153 Closure of gastrostomy	40	7
2984 Excision of pharyngoesophageal diverticulum	40	9	Intestines (Except Rectum)		
2989 Excision branchial cleft cyst or vestige, confined to skin and subcutaneous tissues	15	5	INCISION		
2990 extending beneath subcutaneous tissues	50	10	3161 Enterotomy with exploration of foreign body removal, small bowel	40	7
2992 Tonsillectomy, with or without adenoidectomy	15	4	3162 large bowel	40	7
2996 Adenoidectomy (independent procedure)	10	4	3166 Exteriorization of intestine, preliminary to resection; first stage Mikulicz, resection of intestine	40	9
3000 Excision of tonsil tag, unilateral	10	5	EXCISION		
3004 Excision of lingual tonsil (independent procedure)	10	5	3271 Excision of one or more intestinal lesions not requiring anastomosis, exteriorization or fistulization		11
REPAIR			3272 Small intestine suction biopsy	4	
3011 Pharyngoplasty: plastic or reconstructive operation on pharynx	CC	T	3174 Enterectomy; resection of small intestine with anastomosis	60	11
SUTURE			3176 with enterostomy	60	11
3021 Suture of external wound or injury of pharynx	CC	5	3178 Colectomy; resection of large intestine, all or part, one or two stages, including colostomy and closure, if necessary	70	14
Esophagus			3179 Colectomy, partial, with anastomosis and with or without proximal colostomy	80	14
INCISION			3180 total, with or without ileostomy or anastomosis	90	17
3031 Esophgotomy	50	10	3181 total, with total proctectomy and ileostomy	90	T
3032 for removal of foreign body	50	10	3191 Enteroenterostomy; anastomosis of intestines	45	8
3033 intrathoracic	60	25	ENTEROSTOMY		
EXCISION			External fistulization of intestines		
3043 Esophagectomy: resection of esophagus, transpleural or extrapleural	100	20	3193 small (ileostomy or jejunostomy)	40	10
3044 Local excision, end to end anastomosis	80	20	3195 large (colostomy)	40	10
3046 Esophagogastrrectomy combined thoracoabdominal	CC	25	3197 small or large, for ulcerative colitis	45	12
ENDOSCOPY			3200 Reduction of volvulus, intussusception, internal hernia (by laparotomy)	40	10
3051 Esophagoscopy, diagnostic	8	5	3204 Revision of colostomy	30	7
3052 with biopsy	10	5	3205 Cecopexy; fixation of colon to abdominal wall	CC	8
3053 with insertion of radioactive substance	15	5	DESTRUCTION		
3057 with foreign body removal	20	6	3211 Enterolysis; freeing of intestinal adhesion	35	9
3061 with dilation, direct, any method, initial	15	5	SUTURE		
3063 subsequent	10	5	3221 Suture of intestine (enterorrhaphy), large or small, for perforated ulcer, wound, injury or rupture	40	10
REPAIR			3222 Suture of intestine with colostomy	60	12
3071 Esophagoplasty: plastic repair or reconstruction of esophagus	80	22	3225 Closure of enterostomy, large or small intestine	40	8
3072 Esophagogastrrectomy (cardioplasty)	60	15	3227 Closure of fecal fistula	CC	T
3073 Esophagoduodenostomy	60	20	Meckel's Diverticulum and the Mesentery		
3074 Esophagojejunostomy	60	20	EXCISION		
3075 Esophagostomy; fistulization of esophagus, external	35	11	3231 Excision of Meckel's diverticulum (diverticulectomy)	40	6
3076 Esophagomyotomy (Heller)	60	15	3235 Excision of lesion of mesentery	CC	9
SUTURE			SUTURE		
3081 Suture of esophageal wound, injury or rupture, cervical approach	40	11	3241 Suture of mesentery	35	8
3083 intrathoracic	60	16	Appendix		
3086 Closure of esophagostomy or other external esophageal fistula, cervical	40	11	INCISION		
MANIPULATION			3251 Incision and drainage of appendical abscess	35	6
3092 Dilation of esophagus by sound, bougie or bag, initial, direct	3	5	EXCISION		
3095 subsequent	3	5	3261 Appendectomy	30	6
Stomach			Rectum		
INCISION			INCISION		
3101 Gastrotomy with exploration or foreign body removal	40	8	3251 Incision and drainage of appendical abscess	35	6
3105 Pylorotomy: cutting of pyloric muscle (Fredet-Ramstedt operation)	40	8	EXCISION		
EXCISION			3261 Appendectomy	30	6
3111 Biopsy of stomach, with laparotomy	40	8			
3112 Local excision of stomach ulcer or benign neoplasm	50	10			
3114 Total gastrectomy	100	16			
3115 Subtotal gastrectomy	70	13			
3120 Stomach suction biopsy	3				
3121 Gastroscopy, diagnostic	8	5			
3122 with biopsy	10	5			

Code No.	Units		Code No.	Units	
	S	A		S	A
3283 I and D perirectal abscess	10	11	3464 Hepatectomy, partial, resection of liver	CC	15
EXCISION					
3291 Complete proctectomy, combined abdominoperineal one or two stages	100	18	REPAIR		
3292 Complete proctectomy for congenital megacolon	100	18	3471 Marsupialization of cyst or abscess of liver	50	12
3294 Excision of rectal procidentia	40	8	SUTURE		
3296 Division of stricture in rectum	35	7	3481 Hepatorrhaphy; suture of liver wound or injury	50	12
3297 Valvotomy	35	7	Biliary Tract		
3298 Perineal excision of recurrent malignant tumor	40	T	INCISION		
ENDOSCOPY (Independent Procedure)			3491 Hepaticotomy, with exploration, drainage (hepaticostomy) or removal of calculus	60	12
3311 Proctosigmoidoscopy, diagnostic, initial	3	4	3495 Cholelithotomy or choledochostomy with exploration, drainage or removal of calculus, with or without cholecystotomy	60	12
3312 subsequent	3	4	3500 Duodenocholedochotomy; transduodenal choledocholithotomy	60	16
3313 with biopsy, initial	5	4	3504 Cholecystotomy or cholecystostomy with exploration, drainage or removal of calculus	40	10
3314 subsequent	5	4	EXCISION		
3315 with removal of papilloma or polyp, initial	8	4	3515 Cholecystectomy	50	9
3316 subsequent	8	4	3517 with exploration by incision of common duct	60	11
3317 with removal of multiple papillomas or polyps	10	5	Pancreas		
3319 Sigmoidoscopic control of hemorrhage	CC	5	INCISION		
REPAIR			3541 Pancreatotomy for drainage of pancreatitis	40	10
3321 Proctoplasty, perineal, for stricture or prolapse	CC	7	3544 Removal of calculus	60	12
3322 Perirectal injection of sclerosing solution for prolapse	CC	4	EXCISION		
3325 Proctopexy, abdominal, for prolapse	45	10	3550 Pancreatectomy - subtotal (Simple)	70	T
SUTURE			3551 Pancreatectomy - subtotal (Whipple)	100	T
3331 Closure of rectovesical fistula	50	12	3552 Pancreatectomy - total	100	T
3333 Closure of rectourethral fistula	50	12	REPAIR		
3335 Closure of rectovaginal fistula	40	12	3565 Marsupialization of cyst of pancreas	50	12
MANIPULATION (Independent Procedure)			Abdomen, Peritoneum and Omentum		
3341 Reduction of prolapse of rectum	2	4	INCISION		
Anus			3571 Exploratory laparotomy: exploratory celiotomy	30	7
INCISION			3573 Drainage of peritoneal abscess or localized peritonitis	40	6
3353 Fistulotomy or fistulectomy, simple complicated or multiple	15	5	3575 Subdiaphragmatic or subphrenic abscess, one or two stages	50	8
3354 complicated or multiple	15	6	3578 Retroperitoneal abscess	40	8
3355 Second stage, fistulectomy	15	5	3588 Peritoneocentesis: abdominal paracentesis, initial	5	4
3358 Incision and drainage of ischiorectal abscess with fistulotomy	25	5	3590 subsequent	5	4
3364 Sphincterotomy, anal; division of anal sphincter	10	4	3592 Peritoneal aspiration, diagnostic with needle	1	
EXCISION			INTRODUCTION		
3371 Fissurectomy, with or without sphincterotomy	12	5	3611 Pneumoperitoneum: intraperitoneal injection of air, initial	5	4
3373 Cryptectomy, single, or multiple (independent procedure)	8	4	3612 subsequent	2	4
3374 Papillectomy, single or multiple (independent procedure)	5	4	REPAIR		
3377 Hemorrhoidectomy, external only	10	4	When bilateral hernia is present on day of surgical repair or when one is considered potential for surgical repair, postponement of surgical repair of companion potential hernia or hernia under three months will be considered a bilateral procedure for this schedule as if performed on the same day as one herniorrhaphy was performed.		
3380 internal and external	25	5	HERNIOPLASTY: HERNIORRHAPHY: HERNIOTOMY		
3382 Fistulotomy or fistulectomy and hemorrhoidectomy	30	5	3631 Inguinal, unilateral	35	6
3386 Fissurectomy and hemorrhoidectomy	25	5	3632 with appendectomy	40	8
3392 Enucleation of external thrombotic hemorrhoid	4	4	3633 with orchiectomy	40	7
3395 Excision of external hemorrhoidal tags	6	4	3634 with excision of hydrocele	40	7
ENDOSCOPY (Independent procedure)			3635 recurrent	50	8
3411 Anoscopy, diagnostic	2	4	3638 Inguinal, bilateral	50	9
3413 with biopsy	3	4	3640 with appendectomy	55	9
3415 with removal of foreign body	3	4	3641 with orchiectomy	55	9
3416 subsequent	3	4	3642 with excision of hydrocele	55	9
3417 Control of hemorrhage - endoscopic	CC	5	3643 recurrent	75	10
REPAIR			3646 Femoral, unilateral	40	6
3420 Anoplasty: plastic operation for imperforate anus or stricture	CC	T	3647 with appendectomy	40	9
3421 Anoplasty, infant	25	8	3651 recurrent	50	9
3423 adult	25	T	3654 Femoral, bilateral	50	9
3425 Sphincteroplasty, anal; plastic operation for incontinence	35	T	3658 recurrent	75	10
3426 Thiersch procedure for incontinence and/or prolapse	20	T	3661 Ventral, incisional	55	T
3427 Construction of anus, for congenital absence	40	T	3662 recurrent	60	T
3428 combined abdominoperineal approach	80	T	3663 Epigastric	35	7
DESTRUCTION			3664 recurrent	40	9
3433 Condyloma, single or multiple	7.5	4			
3434 subsequent	7.5	4			
MANIPULATION					
3441 Dilatation of analsphincter under anesthesia	5	T			
Liver					
INCISION					
3456 Aspiration biopsy of liver	5	4			

12

Code No.	Units		Code No.	Units	
	S	A			
3665 Umbilical, under age 12	35	6			
age 12 and over	35	7			
3667 Omphalocele	CC	T			
3709 Diaphragmatic (see Musculoskeletal System 1487)	-	-			
SUTURE					
3734 Secondary suture of abdominal wall for evisceration or disruption (50% of Code 3571) if performed by other than the original operating surgeon	20	7			
URINARY SYSTEM					
Kidney					
INCISION					
3802 Drainage of perirenal abscess (independent procedure)	40	7			
3806 Exploration with or without nephrotomy	CC	10			
3808 Nephrostomy with drainage	55	10			
3811 Nephrolithotomy, removal of calculus	60	11			
3812 Nephrolithotomy for large Staghorn calculus	70				
3813 Division of transection of aberrant renal vessels (independent procedure)	55	11			
3815 Pyelotomy with exploration	55	11			
3816 Pyelostomy with drainage	55	11			
3817 Pyelolithotomy	60	11			
EXCISION					
3820 Renal biopsy (by tochar or needle)	5	4			
3821 Nephrectomy	60	10			
3822 plus total ureterectomy	90	17			
3824 partial	70	12			
3827 Excision of cyst of kidney	55	12			
3829 Aspiration or injections of renal cyst or renal pelvis	10	-			
INTRODUCTION					
3830 Perirenal insufflation unilateral or bilateral	10	4			
REPAIR					
3831 Pyeloplasty: plastic operation on renal pelvis, with or without plastic operation on ureter	65	T			
3835 Nephropexy: fixation or suspension of movable kidney (independent procedure)	55	11			
SUTURE					
3841 Nephrorrhaphy: suture of kidney wound or injury	65	13			
3845 Closure of nephrostomy, pyelostomy or other renal fistula (ex: renal colic fistula)	70	13			
3846 Symphysiotomy for horse-shoe kidney	80	16			
3847 Renal sympathectomy (independent procedure)	55	10			
INCISION					
3851 Ureterotomy with exploration or drainage (independent procedure)	50	10			
3857 Ureterolithotomy	50	10			
EXCISION					
3861 Ureterectomy, complete or partial (independent procedure)	60	12			
3867 Suprapubic excision (independent procedure)	50	9			
REPAIR					
3871 Ureteroplasty: plastic operation on ureter (stricture)	60	12			
3874 Ureteropyelostomy: anastomosis of ureter and renal pelvis	60	12			
3876 Ureterocystostomy: anastomosis of ureter to bladder: Unilateral	50	11			
3877 bilateral	60	15			
3878 Uretero-ileostomy, bilateral - The Bricker Operation	80				
3880 Ureteroenterostomy, anastomosis of ureter to intestine, unilateral	50	12			
3881 bilateral	60	17			
3884 Ureterostomy: transplantation of ureter to skin, unilateral	50	10			
3885 bilateral	70	13			
3886 Plastic repair of ureter for reflux. Hutch operation, unilateral	60				
bilateral	80				
SUTURE					
3891 Ureterorrhaphy: suture of ureter (independent procedure)	65	10			
3895 Closure of fistula of ureter	75	13			
			Bladder		
			INCISION		
			3900 Puncture aspiration of bladder by needle	5	-
			3901 Cystotomy with exploration or fulguration	50	8
			3902 Puncture aspiration by trochar	5	4
			3906 Cystostomy with drainage	25	6
			3907 Cystolithotomy	25	7
			3908 Drainage of perivesical or prevesical space abscess	25	8
			EXCISION		
			3911 Cystectomy, partial	60	11
			3913 complete	80	18
			3918 Transurethral electroresection of vesical neck, female	35	6
			3920 Excision of bladder diverticulum (independent procedure)	60	12
			3922 Excision of bladder tumor (see 3911)	-	-
			3924 Transurethral resection of bladder tumors	40	8
			ENDOSCOPY (independent procedure)		
			3931 Cystoscopy, diagnostic, initial	5	4
			3932 subsequent	3	4
			3933 with biopsy, initial	8	4
			3934 subsequent	5	4
			3935 with ureteral catheterization	10	5
			3936 subsequent	5	5
			3937 or stone removal, manipulation, initial	20	5
			3938 subsequent	15	5
			3939 Ureteral meatotomy	15	5
			3940 Cystoscopy with fulguration minor lesion of bladder	15	5
			3941 Cystoscopy with fulguration of bladder, tumor, initial	25	6
			3942 subsequent	15	6
			3943 Cystoscopy with insertion of radioactive substance with or without biopsy or fulguration, initial	30	5
			3944 subsequent	15	5
			3945 Resection of fulguration of ureterocele	15	7
			3947 Cystoscopic removal of foreign body	15	6
			DESTRUCTION		
			3951 Litholapaxy: crushing of calculus in bladder and removal of fragments	30	7
			SUTURE		
			3960 Bladder, suspension, Marshall-Machette	40	T
			3961 Cystorrhaphy: suture of bladder wound, injury or rupture	45	10
			3965 Closure of vesicovaginal, vesicouterine, or vesicorectal fistula	50	12
			3966 Extrophy of bladder: extensive repair (any method)	70	T
			3967 Plastic Repair of vesical orifice Bradford Young operation	70	
			Urethra		
			INCISION		
			3971 Urethrotomy, external (independent procedure) anterior	10	4
			3973 perineal	25	4
			3975 Urethrostomy: drainage by fistulization (independent procedure)	25	5
			3977 Meatotomy: cutting of meatus (independent procedure)	3	4
			3978 Drainage of periurethral abscess	5	4
			3979 Drainage of perineal urinary extravasation (independent procedure)	25	5
			EXCISION		
			3981 Excision of urethral caruncle or fulguration	7	4
			3987 Excision of carcinoma of urethra	CC	T
			3991 Excision of diverticulum of urethra	40	7
			3994 Excision of fulguration of urethral polyps	5	4
			ENDOSCOPY		
			4000 Urethroscopy, diagnostic	3	4
			4001 with removal of calculus or foreign body	10	5
			4004 with internal urethrotomy	15	5
			4006 with fulguration of posterior urethra	10	5
			4008 subsequent	3	4
			REPAIR		
			4011 Urethoplasty: plastic operation on urethra	30	7
			4019 Diversion of perineal urinary extravasation with diversion of urinary stream	50	8

				13				
Code No.		Units			Code No.		Units	
SUTURE		S	A				S	A
4021 Urethrorrhaphy: suture of urethral wound or injury								
		40	8		4231 Vasotomy: division or transection of vas (independent procedure)		10	
4023 Closure of urethrostomy or fistula of urethra (independent procedure)								
		30	8		4241 Vasectomy, complete or partial (independent procedure)		10	
4025 Closure of rethrovaginal fistula								
		40	8		4251 Vasovasostomy, unilateral		20	
					4252 bilateral		25	
					4261 Ligation of vas (independent procedure)		5.	
MANIPULATION								
4031 Dilation of urethral stricture by passage of sound, initial								
		3	4		Spermatic Cord			
4033 subsequent								
		1	4		EXCISION			
Male Genital System								
Penis								
INCISION								
4101 Dorsal or lateral "slit" of prepuce (independent procedure)								
		3	4		4271 Excision of hydrocele of spermatic cord (independent procedure) unilateral		20	5
					4272 bilateral		30	7
					4275 Excision of varicocele (independent procedure) unilateral		20	5
					4278 with hernia repair (see Hernioplasty)		-	-
Seminal Vesicles								
INCISION								
4111 Biopsy of penis								
		2	4		4281 Vesiculotomy, unilateral		CC	T
4114 Amputation of penis, partial								
		40	7		4282 bilateral		CC	T
4115 complete								
		50	8		EXCISION			
4116 radical, bilateral node dissection								
		80	16		4291 Vesiculectomy		CC	14
4120 Local excision of lesion of penis								
					Prostate			
		5	4		INCISION			
		5	4		4301 Prostatotomy: external drainage of prostatic abscess		25	6
		8	4		4304 Prostatolithotomy: removal of prostatic calculus (independent procedure)		60	11
4127 Excision (or fulguration) of warts								
		5	4		4305 Prostate--needle biopsy		5	4
					4306 Prostate biopsy, perineal operation		CC	T
REPAIR								
4131 Plastic operation on penis for hypospadias, straightening of chordee								
		30	7		EXCISION			
4132 Urethroplasty for hypospadias (Distal Half)								
		50	T		4311 Prostatectomy, perineal, subtotal		60	11
4133 Urethroplasty for hypospadias (proximal half or scrotal)								
		70	T		4312 Prostatectomy, retropubic radical		80	
4134 Plastic operation on penis for injury								
		50	9		4313 Prostatectomy, perineal, radical		80	15
4135 for epispadias								
		70	15		4316 suprapubic, one or two stages		60	10
4138 For urinary extravasation								
		30	4		4318 retropubic		60	11
Testis								
EXCISION								
4141 Biopsy (independent procedure)								
		7	4		ENDOSCOPY			
4144 Orchiectomy, simple, unilateral or bilateral								
		20	5		4321 Transurethral electroresection of prostate, including control of post-operative bleeding, complete		60	4
4146 radical unilateral or bilateral, with retroperitoneal gland dissection								
		80	18		4323 partial, initial		30	7
REPAIR								
4152 Reduction of torsion of testis by surgical means								
		30	6		4324 partial, subsequent		20	7
4156 Orchiopexy, with attachment of testis to thigh (Torek)								
		40	8		Female Genital System			
4157 with detachment of testis from thigh, second stage (Torek)								
		5	5		Vulva			
4158 one or more stages, with hernia repair								
		50	T		INCISION			
Epididymis								
INCISION								
4161 Drainage of abscess of epididymis								
		5	4		4401 Episiotomy, non-obstetrical		7	4
EXCISION								
4171 Biopsy of epididymis								
		7	4		4403 Incision and drainage of abscess of vulva		5	4
4174 Excision of spermatocele without epididymectomy								
		10	5		4405 Incision and drainage of Bartholin's gland abscess, unilateral		5	4
4176 Epididymectomy, unilateral								
		30	5		4411 Incision of hymen: hymenotomy		7	4
4177 bilateral								
		40	6		EXCISION			
REPAIR								
Epididymovasostomy--Anastomosis of epididymis to vas deferens.								
					4421 Biopsy of vulva		5	4
4181 unilateral								
		20	8		4423 Vulvectomy, complete		40	8
4182 bilateral								
		25	10		4424 partial		30	7
Tunica Vaginalis								
INCISION								
4191 Puncture aspiration of hydrocele								
		2	4		4425 radical, including regional lymph nodes		80	15
4192 subsequent								
		1	4		4427 Local excision of lesion of external female genital organ - (Refer 0178)		12	4
4201 Excision of hydrocele, unilateral								
		20	5		4428 Circumcision, female: clitoridotomy		7.5	4
4202 with hernia repair (see Hernioplasty)								
		-	7		4431 Excision of hymen, hymenectomy		7	4
Scrotum								
INCISION								
4211 Drainage of scrotal abscess								
		5	4		4433 Excision of cautery destruction of Bartholin's gland or cyst		15	5
4215 Removal of foreign body in scrotum								
		15	T		4436 Excision or fulguration of Skene's glands		5	4
EXCISION								
4221 Local excision of lesion of scrotum (see 0178)								
					REPAIR			
4224 Resection of scrotum								
					4441 Episoplasty: plastic repair of vulva		CC	5
4227 Scrotoplasty: plastic operation on scrotum								
		CC	T		4443 Plastic operation on urethral sphincter, female (Kelly, Kennedy)		20	5
SUTURE								
4451 Episiorrhaphy: suture of recent injury of vulva								
		10	5		4445 Plastic repair of female urethra for prolapse of mucosa (independent procedure)		CC	T
4455 Episioepineorrhaphy: suture of recent injury of vulva and perineum (non-obstetrical)								
		CC	T		4447 Repair of urethrocele, female (independent procedure)		20	5
Vagina								

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Code No.				Units		Code No.				Units	
				S	A					S	A
INCISION											
4461	Colpotomy with exploration or drainage of pelvic abscess	15	4			4627	Radical hysterectomy for cancer (Wertheim)	100	T		
4463	Puncture and aspiration of Douglas' cul de sac	5	4			4631	Vaginal hysterectomy, with or without pelvic floor repair	60	9		
EXCISION											
4471	Biopsy of vagina (independent procedure)	5	4			4632	Removal of cervical stump	40	8		
4473	Colpectomy or colpocleisis, complete; (complete obliteration of vagina)	40	8			4634	Trachelectomy: cervicectomy: amputation of cervix (independent procedure)	20	5		
4474	partial (La Forte)	40	7			4637	Partial amputation of cervix (with or without dilation and curettage of uterus)	15	5		
4476	Excision of vaginal cyst	10	4			4641	Local excision of lesion of cervix (cauterization or conization)				4
4478	Excision of vaginal septum	10	4			4642	Conization, cold knife, of cervix (with or without dilation and curettage of uterus)	15	4		
REPAIR											
4481	Colpoplasty, anterior vaginal wall, repair of cystocele (independent procedure)	30	5			4644	Local excision of lesion of cervix in conjunction with dilation and curettage	15	4		
4482	with repair of urethrocele	30	7			4646	Dilation and curettage of uterus (independent procedure)	15	4		
4484	posterior vaginal wall; repair of rectocele (independent procedure)	25	6			4647	for removal of uterine polyps	15	4		
4486	Colpoperineoplasty, posterior vaginal wall; repair of rectocele and perineoplasty; pelvic floor repair, including dilation and curettage of uterus	25	7			INTRODUCTION					
4488	Anterior and posterior vaginal walls, repair of cystocele, rectocele, and perineoplasty, including dilation and curettage of uterus	40	8			4671	Insertion of radioactive substance into cervix, uterus or both, with or without biopsy or dilation and curettage (See Radiotherapy Procedures)				
4491	with repair of urethrocele	40	9			4676	Injection of radiopaque contrast media	5	4		
4493	Repair of enterocele, with or without associated related procedure, abdominal approach	40	10			4677	Rubins test	5	4		
4494	vaginal approach	50	9			REPAIR					
4495	Colpopexy	40	8			4680	Hysteropexy (with or without dilation and curettage and surgery on tubes, ovaries, ligaments, etc.) with ventrosuspension: ventrofixation	40	8		
4497	Reconstruction of congenital deformities of the vagina, including vaginal atresia and septate vagina	CC	T			4683	with presacral sympathectomy	40	10		
4501	Colporrhaphy: suture of recent injury of vagina (non-obstetrical)	15	5			4685	Hysteropexy, with interposition operation (Watkins, Kennedy), with or without pelvic floor repair	50	10		
4505	Colpoperineorrhaphy: suture of recent injury of vagina and perineum (non-obstetrical)	15	6			4687	with shortening of round ligaments	40	8		
4506	Closure of vaginal fistulae (see Codes 3335, 3965)	CC	T			4690	with shortening of endopelvic fascia: parametrial fixation (manchester) with or without pelvic floor repair	40	10		
MANIPULATION											
4511	Dilation of vagina (under anesthesia)	5	4			4692	with shortening of sacrouterine ligaments	40	9		
ENDOSCOPY											
4521	Culdoscopy (independent procedure)	10	5			4694	Hysterosalpingostomy: anastomosis of tubes to uterus	50	10		
Oviduct											
4541	Salpingectomy, complete or partial, unilateral or bilateral (independent procedure)	40	7			4696	Tracheloplasty: plastic repair of uterine cervix (Emmett)	15	5		
4545	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (independent procedure)	40	8			SUTURE					
4551	Salpingoplasty for sterility, unilateral or bilateral (independent procedure)	40	T			4701	Hysterorrhaphy: suture of ruptured uterus (Non-obstetrical)	40	10		
SUTURE											
4561	Ligation of fallopian tube, unilateral or bilateral (independent procedure)	30	6			4705	Trachelorrhaphy: suture of recent injury or laceration of cervix (non-obstetrical)	CC	6		
4562	Ligation of fallopian tube, unilateral or bilateral incident to delivery	20	6			MANIPULATION					
Ovary											
INCISION											
4571	Drainage of ovarian cyst or abscess, unilateral or bilateral (independent procedure)	40	7			4711	Dilation of cervix, instrumental (independent procedure)	10	4		
EXCISION											
4581	Excision of ovarian cyst, unilateral or bilateral (independent procedure)	40	7			4713	subsequent	1	4		
4583	Oophorectomy, unilateral or bilateral (independent procedure) complete	40	7			4720	Perineotomy with exploration, drainage of abscess, etc. (see Integumentary System)	5	4		
4585	partial	40	7			REPAIR					
4591	Oophoroplasty, unilateral or bilateral (independent procedure)	40	7			4731	Perineoplasty: plastic repair of perineum (independent procedure)	CC	5		
Uterus and Cervix Uteri											
EXCISION											
4611	Biopsy of cervix (independent procedure)	3	4			4734	in conjunction with vaginal operations (see Vagina, repair, 4481 to 4494)	-			
4614	Hysteromyomectomy: myomectomy; excision of fibroid tumor of uterus	45	8			4735	Repair of perineum and third degree laceration of the rectum	40	8		
4617	Panhysterectomy: total hysterectomy (corpus and cervix)	60	9			SUTURE					
4621	Supracervical hysterectomy: subtotal hysterectomy	45	9			4741	Perineorrhaphy: suture of recent injury of perineum (non-obstetrical)	CC	T		
4624	Fundectomy, uterine: excision of fundus of uterus	45	8			4745	Closure of perineal fistula	CC	7		
MATERNITY											
Visits											
Home or Office--Use Codes 0043-004											
OPERATIVE PROCEDURES											
INCISION											
4801	Classic Cesarean section	50	8								
4802	Low cervical (lower uterine segment) Cesarean section	50	8								
4803	Cesarean section and hysterectomy (Porro)	60	10								
4804	Extra peritoneal Cesarean section	60	10								
4805	Vaginal Cesarean section	50	10								

			Units					Units	
			S	A				S	A
NOTE: Cesarean sections--all fees are exclusive of ante-and post-partum care. If operating physician renders any ante- or post-partum care, he may add appropriate amount using Obstetric Procedures Section of schedule. Fee for Cesarean sections includes all pre- and post-operative care related to the operation, per se.									
STAND-BY PHYSICIAN									
4807 Physician attendance on stand-by basis in operating room to provide infant care following delivery by Cesarean section			detention 4 per hour		Meninges and Meningeal Vessels				
EXCISION									
4808 Abdominal hysterotomy (obstetrical) (Mole or Previa fetus)			40	8	INCISION				
4809 Miscarriage or abortion care, including dilation and curettage			15	5	5051 Drainage of subdural, epidural or subarachnoid space for abscess or hematoma, cranial			80	15
4810 Therapeutic abortion by dilation and curettage of uterus			20	5	5054 spinal			80	15
4811 Removal of extra uterine embryoectopic pregnancy by laparotomy			40	8	5057 Spinal puncture; lumbar puncture (independent procedure) initial, diagnostic with pressure readings			3	4
4815 Removal of hydatidiform mole by dilation and curettage			15	5	5060 Simple spinal puncture			2	-
					5062 Cisternal puncture (independent procedure)			4	4
					5065 Drainage of lateral or sigmoid sinus for phlebitis or thrombosis			60	14
MANIPULATION									
Obstetric procedures:					EXCISION				
4820 Obstetrical delivery only			25	8	5071 Excision of meningeal tumor, cyst or aneurysm			100	20
4821 Obstetrical delivery, including ante partum and post partum care			40	5	INTRODUCTION				
4829 Abdominal hysterotomy (obstetrical) (mole or previable fetus)			40		5081 Encephalography (independent procedure)			15	5
4850 Miscarriage or abortion before period of viability; no surgery			10		5084 Myelography (independent procedure)			10	5
4851 Miscarriage or abortion after period of viability			35		5085 Discogram			10	5
4855 including dilation and curettage			15		5087 Visualization of intracranial aneurysm by intracarotid injection of dye (independent procedure) with exposure of carotid artery			12	T
4860 Therapeutic abortion by dilation and curettage of uterus			20		5091 without exposure of carotid artery bilateral			12	T
4870 Dilation and curettage of uterus for post partum bleeding			15		REPAIR			18	
4878 Circumcision of newborn			3		5105 Marsupialization of lesion of meninges (cyst or abscess)			80	17
ENDOCRINE SYSTEM									
INCISION									
4904 Incision and drainage of thyroglossal cyst (infected)			10	4	Brain				
EXCISION									
4911 Local excision of small cyst or adenoma of thyroid			30	7	INCISION				
4914 Thyroidectomy, total or complete			60	11	5127 Drainage of brain abscess, primary tapping			50	12
4917 subtotal or partial			50	9	5128 subsequent tapping in operating room			10	10
4924 total or subtotal, for malignancy with neck dissection			80	17	5129 subsequent tapping in hospital room or ward			5	-
4937 Recurrent thyroidectomy of thyroid remnant			60	11	5132 Removal of foreign body in brain			CC	T
4941 Excision of thyroglossal duct, cyst or sinus			30	10	5133 Frontal lobotomy, bilateral by craniotomy			60	18
4971 Parathyroidectomy or exploration for para-thyroid			40	11	5134 unilateral by craniotomy			40	12
4972 Mediastinal exploration (See 2680)				19	5138 Tractotomy (medulla, mesencephalon)			100	21
4988 Adrenalectomy, unilateral			70	13	5142 Ventricular tap--Adult			30	7
bilateral			80	17	5143 Ventricular tap--Infant, under age 2 years			10	6
4993 Excision of carotid body tumor			80	18	5145 Subdural tap, unilateral-Adult			25	7
NERVOUS SYSTEM									
INCISION									
Craniotomy -					5146 Subdural tap, unilateral-Infant, under age 2 years			3	6
5001 Trephination (or burr holes), exploratory, unilateral			25	8	EXCISION				
5008 Decompression, orbital, unilateral or bilateral			100	15	5151 Excision of cortical scar			100	20
5011 subtemporal			50	12	5154 Excision of brain cyst, neoplasm or abscess			100	22
5017 Osteoplastic craniotomy (other than operation for brain tumor)			CC	16	5157 Excision of brain tissue, topectomy			100	20
5018 for intracranial vascular malformation			100	T	5161 Excision of choroid plexus			50	20
EXCISION									
5020 Excision of portion of skull for osteomyelitis			CC	T	5164 Excision of lobe of brain			100	22
5021 Laminectomy (other than disc)			80	13	REPAIR				
5025 Hemilaminectomy, lumbar			60	12	5181 Ventriculocisternostomy by catheter: Torkildsen's operation (plastic tube polyethylene)			80	18
5026 cervical			80	14	5182 Ventriculocisternostomy by catheter to ureter or peritoneal cavity			80	20
5027 dorsal			80	13	5185 Marsupialization of lesion (cyst, abscess)			80	20
5028 Excision of intervertebral disk			60	11	Spinal Cord and Nerve Roots				
5029 with spinal fusion			80	16	INCISION				
5030 Excision of neural arch and nerve exploration for spondylolisthesis			70	13	5207 Chordotomy: tractotomy or division or transection of nerve tracts in cord (cervical-dorsal)			80	15
REPAIR									
5031 Cranioplasty: plastic operation on skull with bone graft or metal or plastic plate			60	15	5211 Rhizotomy: Division or transection of nerve roots			80	14
5036 Repair of encephalocele			70	15	5214 Decompression of spinal cord (by removal of hematoma, bone fragments)			80	14
Peripheral Nerves, Cerebral Nerves and Ganglia									
EXCISION									
					5221 Excision of lesion of spinal cord (neoplasm, cyst)			80	20

Code No.	Units		Code No.	Units	
INCISION	S	A	EXCISION	S	A
Neurotomy--Cutting, division or transection of nerve.					
5240 Retrogasserian neurotomy: transection of sensory root, trigeminal nerve, transtemporal	80	17	5411 Enucleation of eyeball (bulb or globe)	30	7
5243 posterior fossa	80	17	5412 with implantation of prosthesis (excludes cost of prosthesis)	35	8
5245 intramedullary	100	19	5413 with movable implant, primary (excludes cost of prosthesis)	45	9
5250 Transection of trigeminal and glossopharyngeal nerve	90	13	5414 secondary (excludes cost of prosthesis)	50	10
5252 Transection of phrenic nerves (phrenicotomy)	15	4	5417 Evisceration of eyeball	30	7
5253 Phrenemphraxis (crushing)	15	4	5418 with implantation in scleral shell (excludes cost of prosthesis)	40	9
5254 Transection of spinal nerves	10	10	5431 Suture of eyeball for wound or injury	CC	T
5256 Transection of occipital nerve	10	10	5437 Peripheral fields, complete	3	-
5258 Transection of vagus nerve; vagotomy; vagectomy (abdominal) (independent procedure)	60	9	5438 Refraction adjunctive to treatment of trauma only	3	-
5263 Exploration of brachial plexus (independent procedure)	40	T	Cornea		
EXCISION					
5270 Excision of peripheral neuroma, digit	6	4	5441 Keratotomy, any type	10	5
5271 other superficial	10	4	5443 Paracentesis of cornea (keratocentesis)	10	5
5272 deep	20	6	5445 Removal of foreign body from surface of cornea	2	4
5273 Resection of nerve, phrenicectomy	15	6	5447 with magnet	3	5
5277 Neurexeresis: avulsion of infraorbital nerve	10	5	5448 under slit lamp	3	-
5278 Obturator neurectomy, unilateral	15	7	EXCISION		
5279 bilateral	30	9	5451 Keratectomy, partial	30	7
5281 Avulsion of phrenic nerve; phrenicoexeresis	15	5	5452 complete	35	8
5282 Stoeffel's neurectomy, unilateral	25	7	5457 Pterygium	20	6
5283 bilateral	35	10	INTRODUCTION		
INTRODUCTION					
5290 Injection of alcohol (intraspinous, paravertebral or paracranial), initial	5	4	5461 Tattoo of cornea, mechanical or chemical	25	7
5291 subsequent	5	4	5465 Curettage and cauterization of corneal ulcer	5	4
5294 Injection of alcohol (second and third divisions for trigeminal neuralgia), initial	7	4	5466 Iontophoresis of corneal ulcer	5	-
NERVE BLOCK					
5298 Paravertebral block, lumbar or thoracic	5	4	REPAIR		
5300 Sumpathetic Block (cervical)	5	4	5471 Keratoplasty: corneal transplant, lamellar	70	14
5302 Stellate ganglion	5	4	5472 partial or complete, penetrating	90	17
5311 Brachial plexus block	5	4	SUTURE		
5312 Intercostal nerves	2	4	5481 Suture of perforated cornea	CC	6
5313 Lumbar, sacral and coccygeal nerves	5	4	Sclera		
5314 Pudendal nerve	5	4	INCISION		
5315 Splanchnic nerves	5	4	5491 Sclerotomy, operative incision, with removal of intraocular foreign body (with or without magnet)	45	10
5316 Iliohypogastric and iliohypogastric nerves	5	4	5492 with removal of foreign body from anterior chamber (with or without magnet)	45	10
5317 Sciatic nerve	2	4	5493 Removal of intra-ocular foreign body with magnet, without operative incision	25	6
5318 Phrenic nerve	2	4	5495 Sclerotomy, posterior (paracentesis)	25	-
5319 Other peripheral nerve	2	4	5496 Aspiration of anterior chamber	4	4
REPAIR					
Neuroplasty--Plastic repair of nerve injury					
5320 Major nerve, upper or lower arm or leg, old injury, including scar excisions, local advancements, etc.	40	6	EXCISION		
5321 recent injury or transplant	30	5	5501 Sclerectomy for glaucoma, with scissors, punch or trephination (Lagrange, Holth, Elliott)	70	10
5322 lysis or freeing from scar of intact nerve	20	5	5503 Scleral resection, full thickness	80	13
5331 Brachial plexus	40	T	5504 Scleral resection, lamellar	80	13
5340 Digital nerve, within digit, suture, lysis or free from scar (each additional, add 25%)	12	5	5505 subsequent	50	13
5343 Sensory nerves, hand or foot (excluding digits) suture lysis or freeing from scar, or transfer (each additional, add 25%)	15	6	INTRODUCTION		
5344 Motor branch, median or ulnar nerve, new or old injury	30	T	5511 Air injection into anterior chamber for chronic glaucoma	15	5
5350 Spinal accessory-facial, hypoglossal-facial spinal accessory-hypoglossal, or others unspecified	60	14	5515 Irrigation and air injection into anterior chamber for chronic glaucoma	15	5
Vegetative Nervous System					
EXCISION					
Sympathectomy:					
5371 Cervical unilateral	50	11	INCISION		
5372 bilateral	70	15	5531 Iridotomy	20	6
5375 Cervicothoracic, unilateral	50	13	5532 with transfixion of iris; iris bombe	20	6
5376 bilateral	75	16	EXCISION		
5381 Lumbar, unilateral	40	9	5541 Excision of lesion of iris	40	8
5382 bilateral	60	13	5544 "Complete" iridectomy; optical iridectomy; preliminary iridectomy	40	7
5385 Splanchnicectomy, unilateral	50	11	DESTRUCTION		
5386 bilateral	75	16	5551 Diathermy of the ciliary body; cyclodiathermy	25	6
5390 Presacral neurectomy, hypogastric plexus	40	9	5552 Iridodialysis--repair	35	8
EYE					
Eyeball					
INCISION					
5401 Goniotomy, primary	30	6	5553 Corelysis	35	8
5402 secondary	20	6	5554 Cyclodialysis	40	7
SUTURE					
5561 Repair of prolapsed iris with suture of perforated sclera or cornea					

Code No.	Units		Code No.	Units	
	S	A		S	A
MANIPULATION					
5571 Iridotaxis (iridencleisis): stretching of iris (independent procedure)	40	7	5734 Tarsorrhaphy: suture of tarsal cartilage(see 0265 to 0267)	-	-
Crystalline Lens			5737 Canthorrhaphy: suture of palpebral fissure of canthus (see 0265 to 0267)	-	-
INCISION			Conjunctiva		
5601 Discission; needling of lens primary	20	6	5741 Removal of foreign body from surface of conjunctiva	1	4
5602 secondary	15	6	5742 embedded in conjunctiva	2	4
EXCISION			5743 Suture of conjunctiva	CC	4
5611 Extraction of lens, intracapsular or extra-capsular, unilateral	70	9	EXCISION		
5616 Removal of dislocated lens	80	11	5751 Biopsy of conjunctiva	5	4
Vitreous			5753 Excision of lesion of conjunctiva: cyst	5	4
INCISION			5754 epithelioma (see - 0178 or 0190)	-	T
5622 Transplantation of vitreous	45	10	5755 Excision of lesion of conjunctiva: nevus (see 0178 or 0190)	-	T
Retina			REPAIR		
REPAIR			Conjunctivoplasty:		
5631 Reattachment of retina, electrocoagulation, initial	80	12	5771 Free graft of conjunctiva (see 0295 to 0296)	-	T
5632 subsequent	40	12	5773 of mucous membrane (see 0295 to 0296)	-	T
Ocular Muscles			5774 Flap operation for corneal ulcer	15	6
INCISION, EXCISION AND REPAIR			5775 Flap operation; "flapping" of conjunctiva for perforating injuries or operative wound	15	6
5641 Myotomy, tenotomy, recession, resection, advancement or shortening of ocular muscles for strabismus, one or more stages, unilateral	40	6	5776 for laceration	7	5
5642 bilateral	55	8	5777 Repair of symblepharon without graft	CC	5
5643 One muscle, initial	30	6	Lacrimal Tract		
5646 subsequent	20	6	INCISION		
5647 Muscle transplant	60	10	5801 Drainage of lacrimal gland(abscess)	10	4
Orbit			5803 Drainage of lacrimal sac-dacryo-cystotomy: dacryocystostomy	5	5
INCISION			5804 Dacryoscystotomy: dacryocystostomy, intranasal	5	6
5651 Orbitotomy with exploration	50	10	EXCISION		
5652 with drainage of intraocular abscess	50	8	5811 Excision of lacrimal gland: dacry-adenectomy	40	7
5653 with removal of intraorbital foreign body	55	10	5813 Excision of lacrimal sac: dacryo-cystectomy	40	8
5662 Excision of lesion of orbit, benign or malignant	55	12	5815 Excision of lacrimal gland tumor	45	9
5664 Exenteration or evisceration of orbital contents	80	15	INTRODUCTION		
5667 with graft	85	T	5821 Catheterization of lacrimonasal duct, initial	3	4
5668 without graft	80	15	REPAIR		
INTRODUCTION			5831 Plastic operation on canaliculi	CC	T
5671 Orbital injection of alcohol for hemorrhagic glaucoma - or intractable pain	10	4	5833 Dacryocystorhinostomy: fistulication of lacrimal sac into nasal cavity, with or without anterior ethmoidectomy (Toti)	45	10
REPAIR			5835 Closure of punctum by cautery	4	4
E5681 Plastic repair of orbit	CC	T	MANIPULATION		
Eyelids			5841 Dilation of punctum	2	4
INCISION			5843 Probing of lacrimonasal duct, initial	3	-
5691 Blepharotomy with drainage of abscess of eyelid or chalazion	2	4	5844 subsequent	2	-
5692 with drainage of Meibomian glands; hordeolum (stye)	2	4	5845 under general anesthesia	5	4
5697 Recession of levator palpebrae muscle	45	8	EAR		
5698 Resection of levator palpebrae muscle	45	8	External Ear		
EXCISION			INCISION		
5701 Blepharectomy	5	4	5901 Drainage of abscess of auricle (see 0114)	2	4
5702 excision of Meibomian glands (chalazion) single	5	4	5903 Drainage of hematoma of auricle	2	4
5703 multiple	6	5	5905 Drainage of abscess of external auditory canal	2	4
5707 Excision of lesion of eyelid, malignant (see 0265 to 0296)	-	-	EXCISION		
5712 Epilation, electrolytic	5	T	5911 Biopsy of ear	3	4
5717 Excision of xanthoma (see 0265 to 0269)	-	-	5914 Local destruction of lesion of ear	CC	5
REPAIR			5915 with plastic closure (see 0178 to 0319)	-	T
5721 Blepharoplasty: plastic repair of eyelid, with or without graft; any type	CC	T	5917 Complete excision of ear: amputation of ear	25	6
5723 Canthoplasty: plastic repair of canthus	20	T	5922 Excision of exostosis of external auditory canal	20	6
5724 Plastic restoration of eyebrow (by graft)	45	T	5924 Radical excision of malignant lesion of external auditory canal	40	12
5725 Tarsoplasty: plastic repair of tarsal cartilage	30	T	5926 with neck dissection	CC	T
5726 Reposition of cilia base	CC	T	ENDOSCOPY		
5728 Cautery puncture for entropion or ectropion	4	4	5931 Otoscopy with removal of foreign body in external auditory canal	3	-
SUTURE			5933 under general anesthesia	5	4
5731 Blepharorrhaphy: suture of eyelid (see 0265 to 0267)	-	-	REPAIR		
			E5941 Otoplasty: plastic operation on ear (see 0265 to 0319)	-	-
			E5943 Reconstruction of ear with graft of skin or cartilage (see 0265 to 0319 and 0619 to 0622)	-	-

		Units		18	
Code No.		S	A		Units
SUTURE					
5951 Suture of wound or injury of ear (see 0265 to 0267)		-		*Special body section radiography, etc.	6
				Bronchography	6
				*Bronchography, including instillation of contrast substance and anesthesia	7
	Middle Ear			*Angiocardiography, single plane	8
INCISION				*Angiocardiography, double plane	12
5961 Myringotomy: tympanotomy: plicotomy		2	4	*Fluoroscopy, independent procedure	1
5963 under general anesthesia		5	4	Ribs	3
				Sternum	3
				*Sternoclavicular joint	3
EXCISION					
5971 Mastoidectomy, simple		35	8	SPINE AND PELVIS	
5975 radical		50	11	Spine, complete	9
5980 Exenteration of air cells of petrous pyramid, including radical mastoidectomy		00	T	*Spine, cervical, partial	3
5982 Removal of middle ear polyp by snare		4	4	*Spine, cervical, complete, including special obliques and/or flexion studies	5
5983 Removal of middle ear polyp by snare, with anesthesia		8	4	*Spine, thoracic, partial	2
5984 Ossiculectomy		15	7	*Spine, thoracic, complete	3
REPAIR				Spine, lumbosacral	3
5991 Revision of radical mastoid cavity		50	9	*Spine, lumbosacral with obliques	4
5995 Tympanoplasty, complex		75	T	*Spine, lumbo-sacro-coccygeal	5
5996 Tympanoplasty, simple		50	T	Spine, sacro-coccygeal	3
				Spine, lumbo-sacral, including pelvis and hips	5
SUTURE				*Pelvis, including hips	2.6
6001 Closure of fistula mastoid		25	7	*Pelvis, with lateral hip(one or both)	4.0
				*Sacro-iliac joints	4.0
	Internal Ear			Myelography	6
				Discogram	5
INCISION				UPPER EXTREMITIES	
6011 Labrynthotomy, any type		60	12	Clavicle	2
EXCISION				Shoulder	2.6
6021 Labrynthectomy		60	12	Humerus, including one joint	2
REPAIR				Elbow	2
6031 Fenestration of semicircular canals		80	15	Forearm, including one joint	2
6032 Revision of fenestration operation		60	12	Wrist	2
6033 Stapes mobilization		50	T	Hand	2
				Fingers	1
AUDITORY EXAMINATION				LOWER EXTREMITIES	
6050 Audiometer testing, any method		2	-	Hip, single view	2
6052 Barany vestibular test		2	-	*Hip, complete, multiple positions	3
				Hip, studies during operative procedure	7
				Femur, including one joint	3
				Knee	2
				Leg, including one joint	2
				Ankle	2
				Foot	2
				Toes	1
				ABDOMEN	
				Plain film study, independent procedure	2
				Special Studies (passage of Miller-Abbott tube, etc.)	4
				Fistula examination with contrast media	4
				*Supine and erect, for obstruction or perforation	3
				GASTROINTESTINAL TRACT	
				Complete, barium meal, enema and gall bladder	12
				*Complete, barium meal, enema and air enema, and gall bladder	13
				*Barium meal & plain enema	10
				Esophagus	4
				Small Bowel Studies, independent procedure	5
				Upper gastrointestinal tract	6
				Colon by barium enema	5
				Colon by barium enema and air contrast	6
				Gall bladder, cholecystography	4
				Cholangiography, operative or post operative	4
				*Cholangiography, intravenous including opaques	8
				UROLOGICAL:	
				Kidney, ureter and bladder, single film	2
				Pyeelography, intravenous	6
				*Pyeelography, retrograde, partial	3
				*Pyeelography, retrograde, complete	5
				Cystography	3
				Urethrocytography	4
				GYNECOLOGICAL AND OBSTETRICAL:	
				Abdomen and pelvis, for fetus	2
				Pelvicephalometry	5
				Placentography	4

		Units			Units
*Hysterosalpingography, including injection of opaque media		7	<u>LABORATORY PROCEDURES</u>		
*Hysterosalpingography, injection by referring physician		5	<u>BACTERIOLOGY</u>		
<u>SPECIAL STUDIES</u>			Culture, Bacterial, Routine:		
Reduction of fractures, fluoroscopic assistance	2		Abscess or wound	2	
Localization of foreign body (excepting eye)			Blood	2	
fluoroscopy and film as indicated	3		Fluids (spinal, pleural, urine, sputum, peritoneal, joint, etc.)	2	
Foreign body removal, fluoroscopic assistance	3		Miscellaneous	2	
Bone age studies	3		Stool	2	
Bone Length studies	4		Throat	2	
Bone survey for metastasis	7		Vaginal	2	
Arteriography	7		Culture, fungus studies	3	
Venography	5		Culture, M. Tuberculosis	1	
Pneumo-arthrography or opaque	5		Concentration and culture	3	
Fistula or Sinus injection (trunk)	4		Darkfield examination	2	
Mammography	4		Innoculation, animal	3	
Body section radiography	6		Sensitivity, bacterial (excludes culture):		
*Aortography, excluding injection	7		One organism	1	
Bedside, institutional, add'l chg.	1		Second organism	1	
			Maximum (3 or more)	3	
<u>RADIOTHERAPY PROCEDURES</u>			Smear only, bacterial	.6	
Maximum allowance in any twelve month period	80		Smear only, M. Tuberculosis	1	
* For the purpose of this schedule neoplasms will include Hodgkins Disease, leukemia, and lymphosarcomas			Concentration and smear	1.5	
			Vaccine (includes culture)	3	
**All roentgen units measured in air.			<u>BIOCHEMISTRY</u>		
Roentgen therapy, soft radiation up to 60 KVP			Ammonia	1	
* Neoplasms - per treatment visit	3		Amylase	1	
* Non-neoplastic - per treatment visit	2		Ascorbic Acid	1	
Roentgen therapy - medium and ortho-voltage			Bilirubin, total	1	
60 - 1000 KVP			Blood volume (dye)	3	
* Neoplasms - per treatment visit	2		Bromides	1	
* Non-neoplastic - per treatment visit	1.6		Bromosulfalein (includes dye)	2	
Megavoltage x-ray - Betatron, telecobalt, telecesium			Calcium	1	
* Neoplasms - per treatment visit	2.6		Calculi, renal	2	
* Non-neoplastic - per treatment visit	2		Carotin	1	
Radium Therapy			Catecholamines	2	
* Application only (interstitial, intra-cavitary or other)	15		Cephalein flocculation	1	
* Consultation, dosage calculation, preparation and supply of radioelement	15		Chloride: blood or spinal fluid	1	
* Superficial application of plaque or mold for benign lesion (consultation not applicable) per treatment	3		Cholesterol	1	
Fees are payable alone or in addition to Surgical Fee			Cholesterol and esters	1.5	
			CO ₂ combining power	1	
<u>RADIOISOTOPES DIAGNOSTIC</u>			Colloidal red test (includes dye)	2	
<u>Drug Included</u>			Congo red (includes dye)	1	
I ¹³¹ uptake, single, determination study	3		Creatinine	1	
I ¹³¹ uptake at 2 or more intervals	4		Cryoglobulin	1	
I ¹³¹ uptake and scanning	7		Duodenal contents: trypsin, amylase, lipase	3	
I ¹³¹ conversion ratio	4		Electrophoresis:		
Plasma Volume Determination (Albumin Method)	3		Protein with fractions	3	
Red Cell Mass Determination	4		Lipoproteins	3	
Red Cell Survival Study	6		Glycoproteins	3	
Spleen Localization	5		Fats, total, stool (quant.)	3	
Chromium Blood Loss Study	6		Fatty acids, stool (qual.)	1	
Brain Tumor Localization	10		Fibrinogen	1	
Ocular Tumor Localization	10		Gamma Globulin	1	
Liver Function Study	5		Gamma globulin (Immunochemical)	2	
Liver Function with Scanning	7		Gastric analysis:		
Renal Function study	5		Single specimen	1	
Previous Anemia Study (Schilling Test)	5		Fractional analysis	2	
Gastro-Intestinal Absorption Study	10		Diagnex (tubeless)	1	
			Glucose	1	
<u>RADIOISOTOPES THERAPEUTIC</u>			Gonadotropin, blood	3	
<u>Does Not Include Cost of Drug</u>			Hydrogen ion concentration	1.5	
Thyroid Cancer	30		Icterus index	.6	
Maximum per year	60		Iodine, protein bound	2	
Hyperthyroidism	20		Iron, serum	2	
Maximum per year	30		Ketosteroids, 17	3	
Thyroid Ablation for Cardiac Disease	40		Lactic acid	1	
Polycythemia, Leukemia and Metastatic Bone Cancer	10		Lipase	1	
Maximum per year	30		Magnesium	1	
Interstitial Therapy or Intercavitary Therapy with Radioactive Colloids			Non Protein Nitrogen	1	
Gold (Au ¹⁹⁸)	30		Occult blood	.2	
Chromic Radio-phosphate (Cr P ³² O ₄)	20		Oxygen capacity or content	2.0	
Strontium for Pterygia, etc.	7		Phosphatase:		
			Acid or alkaline	1.5	
			Acid, prostatic	2	
			Phosphorus	1	
			Potassium	1	
			Protein, total	1	
			Total with A/G ratio	2	
			Total, spinal fluid	.6	
			Sodium	1	
			Sulfonamides	1	
			Sweat test (quantitative)	1.5	

BIOCHEMISTRY

	Units
Thymol turbidity	1
Toxicology:	
Barbiturates (qual.)	3
Heavy metals	3
General unknown	5
Transaminase	2
Trypsin, stool	2
Urea nitrogen	1
Uric acid	1
Urobilinogen	1
Van den Bergh	1.5
Vitamin A	2
Zinc Sulfate turbidity	1

BLOOD BANK

Coombs test	1
Cross matching	1
Grouping and Rh typing	1
Rh titer	2

HEMATOLOGY

Complete blood count including hemoglobin, white blood cell count and differential, hematocrit or red blood cell count.	1.2
Bleeding time	.4
Bone marrow film (ecl. puncture)	2
Clot retraction time	.6
Clotting time, venous	.6
Electrophoresis, hemoglobin	2
Eosinophil count, total	.6
Erythrocyte count (I.P.)	.6
F-Hemoglobin determination (I.P.)	1
Fibrinolysins	1
Fragility, capillary	.2
Fragility, erythrocytes:	
Mechanical	1
Osmotic	2
Hematocrit (I.P.)	.6
Hemoglobin (I.P.)	.6
L. E. preparation	1.5
Malaria, smear	1
Methemoglobin	1
Platelet count	1
Prothrombin time	1
Prothrombin consumption	2
Recalcified plasma coag. time	1
Reticulocyte count	1
Sedimentation rate	.6
Sickle cell preparation	.6
Thromboplastin Gen. Test	5
W.B.C. and differential (I.P.)	.6

HISTOPATHOLOGY

Routine: Tissue Examination	2
"Rush" tissues (addition to routine)	1
Multiple biopsies: for each 5	2
O.R. Consultations	5
Exfoliative cytology:	
Minimum	1
Each slide over 2.	.5

IMMUNOLOGY

Agglutinations, febrile	3
Brucellosis	1
Paratyphoid A	1
Proteus OX-19	1
Tularemia	1
Typhoid H	1
Typhoid O	1
Agglutination, cold	1
Antistreptolysin titer	1.2
Colloidal Gold	1
Complement fixation for Gonococcus	1.5
Complement fixation for virus and rickettsial diseases	2
C-reactive protein	.6
Heterophile titer	1
Heterophile, differential	2
R-A test (rheumatoid arthritis)	.6
Serology for syphilis (blood or spinal fluid)	
Complement fixation	1.5
Flocculation test	1
Slide tests	.6

PARASITOLOGY

	Units
Ova and parasites	1
Search for amoeba	1
Tapeworm identification	1
Tapeworm, identification of head	1

URINE

Analysis, routine	.6
Addis count	2
Chemistry: (Tests not listed have same units as under Biochemistry)	
Acetone, quantitative	2
Acidity by titration	.6
Albumin, qualitative	.2
Bile	.2
Calcium, qualitative	.4
Hemosiderin	1.0
Hippuric acid	1
Hydrogen ion concentration	.4
Indican	2
Iodine, quantitative	3
Melanin	1
Nitrogen, total	1
Phenols	1
P.S.P. (Phenosulphonthalein)	2
Porphyrins, screening	1
Porphyrins, spectroscopic	2
Protein, Bence-Jones	.4
Confirmatory test	1
Serotonin (SHIAA) qualitative	1
Quantitative	3
Specific Gravity	.1
Sugar, acetone, diacetic acid (for each 2 or part thereof)	2
Sugar, quantitative	.6
Sugar, identify	2
Concentration or dilution	.4
Microscopic only	.4
Mosenthal	.4
Pregnancy test	2
Quantitative A-Z	5

SPECIAL PROCEDURESCardiovascular SystemProcedure

Electrocardiogram, with I & R	3
with exercise test, I & R	5
Vectorcardiogram	3
Ballistocardiogram	3
Phonocardiogram	3
Circulation Time	1
Venous Pressure	1.5
Cardiac fluoroscopy	2
Vital Capacity	1
Reflex vasodilatation test	3
Oscillometer test	1

Respiratory System

Ventilatory studies, complete with graphic record, I & R	5
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Digestive System

Esophagus, dilation (any method), initial	
subsequent	CC
I 131 Absorption	

Hematology

L. E. cell study	1.5
Thromboplastin generation test	5

Renal System

Specialized laboratory work connected with the artificial kidney	20
Fresh urinary sediment examination by a physician using specialized microscopy (Polarizing or ultraviolet) or special histochemical staining methods	2
Urine examination for special substances (leucine crystals, sulphur crystals, etc.)	
with specialized microscopy	1
with use of chemical methods	2

	Units
Identification of poisons in serum and urine, single determinations - salicylate and bromide, barbiturates and doriden	5 5
Insertion of indwelling catheter in peripheral vein or body cavity for infusion	3

Miscellaneous

B.M.R. (I.P.)	2
Skin tests with bacterial extracts (tuberculin, histoplasmin, etc.)	.6
Intermittent Positive Pressure Nebulization Treatments (Bennett Pressure Breathing Therapy Unit, Emerson Assistor, etc.)	2
initial	1
subsequent	1
Simple Nebulization Treatment	0.6